| CAMPAIGN FINANCE REPOR WISCONSIN LOCAL COMMITT | | | | | | | | | |
|---|--|-----------------------|---------------|---------------------|----------------------------|---|--|--|--|
| Is this report an Amendment? | | | | | | | | | |
| COMMITTEE IDENTIFICATION | | | | | | | | | |
| Name of Committee Friends of Chris Schmidt | 1 | | | | | | | | |
| Address 4210 Odana Rd | 1 | | | | | | | | |
| City, State, ZIP Madison, WI, 53711 | OFFICE USE ONLY | | | | | | | | |
| Please check if address is different than previously reported | _ | | | | | | | | |
| NAME OF REPORT March 2019 Continuing Spring | | | | | | | | | |
| SUMMARY OF RECEIPTS AND DISBURSEMENTS | Column A | | | Column B | Audited Totals | | | | |
| 1. RECEIPTS | • | This Period | | YTD | Office Use Only | | | | |
| A. Contributions including Loans from Individuals | \$ | - | | | | , | | | |
| B. Contributions from Committees (Transfers-In) | | - | | | | | | | |
| C. Other Income and Commercial Loans | \$ \$ | - | | | | | | | |
| TOTAL RECEIPTS (Add totals from 1A, 1B, and 1C) | \$ | - | \$ | - | | | | | |
| 2. DISBURSEMENTS | | | | | • | | | | |
| A. Gross Expenditures | \$ | 10.00 | \$ | 10.00 | | | | | |
| B. Contributions to Committees (Transfers-Out) | \$ | _ | | | | | | | |
| TOTAL DISBURSEMENTS (Add totals from 2A and 2B) | \$ | 10.00 | \$ | 10.00 | | | | | |
| CASH SUMMARY | | | | | | | | | |
| Cash Balance at Beginning of Report | \$ | 433.70 | | | | | | | |
| Total Receipts | \$ | - | | | | | | | |
| Subtotal | \$ | 433.70 | | | | | | | |
| Total Disbursements | \$ | 10.00 | | | | | | | |
| CASH BALANCE AT END OF REPORT | \$ | 423.70 | | | | | | | |
| INCURRED OBLIGATIONS (at close of period) | \$ | - | | | | | | | |
| LOANS (at close of period) | \$ | - | | | | | | | |
| I certify that I have examined this report and to the best of my knowle | edge (| and belief it is true | , <i>co</i> i | rrect and complete. | | | | | |
| Type or Print Name of Candidate or Treasurer | Signature of Candidate or Treasurer | | | | Date 25-Mar-19 | | | | |
| Christopher C Schmidt | _{Email} (<i>We Schupel</i>) chris@chrisschmidt.org | | | | Daytime Phone 608-238-7494 | | | | |

NOTE: The information on this form is required by ss. 11.0204, 11.0304, 11.0404, 11.0504, 11.0604, 11.0804, 11.0904, Wis. Stats. Failure to provide the information may subject you to the penalties of ss.11.1400, 11.1401, Wis. Stats.

SCHEDULE 2-A

Gross Expenditures

| IN-KIND | DATE | NAME | ADDRESS | CITY | <u>ST</u> | ZIP | PURPOSE | AMOUNT | COMMENTS |
|---------|----------|---------------------|-----------------------|---------|-----------|--------|-------------|---------|----------|
| | 01/31/19 | Summit Credit Union | 670 W. Washington Ave | Madison | WI | 53703 | Service Fee | \$ 5.00 | |
| | 02/28/19 | Summit Credit Union | 670 W. Washington Ave | Madison | WI | 53703 | Service Fee | \$ 5.00 | |
| | | | | | | | | | |
| | | | | | | Total: | \$ 10.00 | | |