



Campaign Finance Report Short Form GAB-2a Government Accountability Board	GAB ID Number
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<input checked="" type="checkbox"/> Spring	<input type="checkbox"/> Fall	<input type="checkbox"/> Special	Pre-Primary <input checked="" type="checkbox"/>	<input type="checkbox"/> Continuing Report due Jan. 31, ____
<input type="checkbox"/> Spring	<input type="checkbox"/> Fall	<input type="checkbox"/> Special	Pre-Election ____	<input type="checkbox"/> Continuing Report due July 20, ____

Sandra E. Diceman

Name of Candidate or Committee (in full)

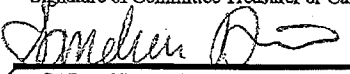
818 S gammon Rd #1 madison WI 53719

Address

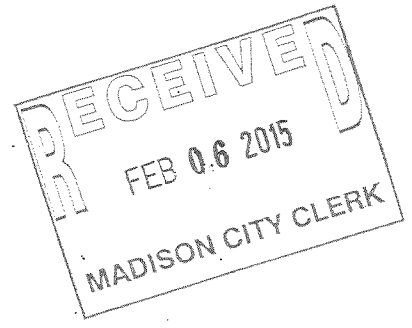
608-963-8169

Daytime Phone

I certify that the above named committee or candidate did not receive contributions or other income, make disbursements, or incur obligations during the period covered by this report and that the cash balance remains the same as previously reported. This report fulfills filing requirements under Sec. 11.06(9), Stats.

Signature of Committee Treasurer or Candidate 	Date <u>2/6/15</u>	Email Address <u>Sandraed@att.net</u>
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GAB-2a | Rev 04/2014 | Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984 |
 Phone: 608-261-2028 | Fax: 608-264-9319 | Web: <https://cfis.wi.gov> | Email: GABCFIS@wi.gov



608-266-4666