I certify that the above named committee or candidate did not receive contributions or other income, make	608-5/6-898/ Daytime Phone	Name of Candidate or Committee (in full) 5760 Barbara Drive Fitchbirg 537 // Address	100/	P Spring P Fall P Special Pro-Election P Con	Pring P Fall P Special Pre-Primary P Cor	Campaign Finance Report Short Form ETHCF-2a
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 filling requirements under Sec. 11 0102/20/4. Com-	0	Fitchbuy 53711	300	P Continuing Report due July 15, <u>All I le</u> O Continuing Report due 4 th Thes Sept	O Continuing Report due Jan. 15,	Ethics ID Number

ETHCF-2a | Rev 01/2016 | 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 mallven 7/15/16 arkene_silverace yahoo.um

Signature of Committee Treasurer or Candidate

Email Address

MADISON CITY CLERK					
	107 8 1016				
	EGEINE	(0			