	AMPAIGN FINANCE REPOR SCONSIN LOCAL COMMITT				
	Is this report an Amendment?	NO			
COMMITTEE IDENTIF	ICATION				
Name of Committee	Mertz for Madison				
Address	1210 Gilson Street				
City, State, ZIP	Madison WI 53715			OFFICE USE ON	ILY
Please check if address is	different than previously reported				
NAME OF REPORT	Jan 2019 Continuing Pre-Primary 2	.0	Spring	Fall	Special
	July 20 Continuing Pre-election 20	0	Spring	Fall	Special
	September 20 Continuing				
SUMMARY OF RECEI	PTS AND DISBURSEMENTS	Column A	Column B	Audited Totals	
1. RECEIPTS		This Period	YTD	Office Use Only	
A. Contributions include	ing Loans from Individuals	\$130.00			
B. Contributions from C	Committees (Transfers-In)	\$-			
C. Other Income and C	Commercial Loans	\$-			
TOTAL RECEIPTS (Ad	dd totals from 1A, 1B, and 1C)	\$130.00	\$-		
2. DISBURSEMENTS					
A. Gross Expenditures		\$4.37			
B. Contributions to Cor	nmittees (Transfers-Out)	\$25.00			
TOTAL DISBURSEME	NTS (Add totals from 2A and 2B)	\$29.37	\$-		
CASH SUMMARY					
Cash Balance at Begin	ining of Report	\$776.96			
Total Receipts		\$130.00			
Subtotal		\$906.96			
Total Disbursements		\$29.37			
CASH BALANCE AT E	END OF REPORT	\$877.59			
INCURRED OBLIGAT	IONS (at close of period)	\$-			
LOANS (at close of pe	riod)	\$-			
	ned this report and to the best of my knowle	edge and belief it is true,	correct and complete		
Type or Print Name of Candidate	or Treasurer	1. 1. Mer	4	Date 01/10/19	
Thomas J Mertz			F	0 1/10/19 Daytime Phone	
		tjmertz@sbcglobal.net		_608-215-1942	

**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.

Print the completed report and file with your local clerk or election commission by the filing deadline. ETHCF-2LE (01/16)

# SCHEDULE 1-A Contributions Including Loans from Individuals

<u>IN-KIND</u>	CONDUIT	<u>DATE</u>	<u>LAST</u>	<u>FIRST</u>	ADDRESS	<u>CITY</u>	<u>ST</u>	<u>ZIP</u>	OCCUPATION	AMOUNT	<u>YTD</u>
		12/13/18	Klehr	Mary	1031 Sherman Ave	Madison	WI	53703		\$30.00	
		12/13/18	Kendziorski	Christina	2250 Rugby Way	Madison	WI	53726		\$100.00	

COMMENTS	

### SCHEDULE 1-B Contributions from Committees

	<u>IN-</u> KIND	DATE		Ethics ID#	ADDRESS	СІТҮ	ST	ZIP		YTD
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COMMENTS

SCHEDULE 1-C

						REASON FOR	
<u>DATE</u>	NAME	ADDRESS	<u>CITY</u>	<u>ST</u>	<u>ZIP</u>	<u>INCOME</u>	AMOUNT

COMMENTS

SCHEDULE 2-A

**Gross Expenditures** 

IN-KIND	<u>DATE</u>	<u>NAME</u>	ADDRESS	<u>CITY</u>	<u>ST</u>	<u>ZIP</u>	<u>PURPOSE</u>	AMOUNT
	12/13/18	Pavnal					Bank fee	\$4.37

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COMMENTS	

SCHEDULE 2-B

#### **Contributions to Committees**

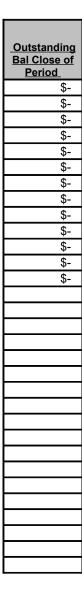
IN-KIND	<u>DATE</u>	NAME	Ethics ID#	ADDRESS	<u>CITY</u>	<u>ST</u>	<u>ZIP</u>	AMOUNT	<u>YTD</u>
	12/15/2018	Grant for Madison		3930 Anchor Drive	Madison	WI	53714	\$25.00	\$25.00

COMMENTS

#### SCHEDULE 3-A

# Incurred Obligations Excluding Loans

DATE	NAME	ADDRESS	<u>CITY</u>	<u>ST</u>	<u>ZIP</u>	PURPOSE	<u>Outstanding</u> <u>Balance Beg</u> <u>of Period</u>	<u>New</u> Obligations This Period	Payment This Period





#### SCHEDULE 3-B

### Loans: Individual, Committee or Commercial

DATE	NAME	ADDRESS	<u>CITY</u>	<u>ST</u>	ZIP	Outstanding Balance Beg <u>of Period</u>	<u>New Loans</u> <u>This Period</u>	<u>Cumulative</u> Payments This <u>Period</u>	Outstanding Balance End of Period	<u>Guarantor (if any)</u> Name and Address
									\$-	
									\$-	
									\$-	
									\$-	
									\$-	
									\$-	
									\$-	
									\$-	
									\$-	
									\$-	
									\$-	

## SCHEDULE 4 TERMINATION REQUEST

A committee may terminate its registration and reporting requirements if the committee will no longer receive
contributions, make disbursements or incur obligations, and the obligations and cash balance have been reduced to zero.

• Candidates may not terminate prior to the election in which they are participating.

Please read carefully and, if necessary, indicate how residual committee funds have been disposed of or if
outstanding loans or obligations have been forgiven. Sign and date the termination request at the bottom of this page.

- Make sure the termination box on the cover page of this report is checked.
- Please note: An audit must be completed and all obligations, including settlement offers, fulfilled before termination
  can be granted. All records must be maintained until 3 years after the date of an election in which the registrant participates, even if termination is granted. (Per Wis. Stats. 11.0201(4), 11.0301(4), 11.0401(4), 11.0501(4), 11.0601(4), 11.0901(4))

	DISPOSAL OF RESIDUAL FUNDS									
THIS INFORMATION SHOULD ALSO BE INCLUDED ON SCHEDULE 2-A AND/OR 2-B.										
DATE	RECIPIENT	AMOUNT								

LOAN OR DEBT FORGIVENESS I hereby forgive all personal loans or have assumed responsibility for any and all debts of my campaign committee.		
DATE	Endorser, Guarantor, or Creditor	AMOUNT

TERMINATION REQUEST. I hereby request that the committee registration be terminated. I declare that the committee has not incurred any obligations and does not anticipate incurring any. The committee does not anticipate receiving any further contributions or making any disbursements. I further state that the cash balance has been reduced to zero and that all remaining funds have been disposed of in the manner prescribed by law.

Signature of Candidate or Treasurer