CAMPAIGN FINANCE REGISTRATION STATEMENT

STATE OF WISCONSIN

Note: An amended registration statement must be filed within 10 days of any changes in information.

								Comm	ittee Nu	mber			
1. Is this an Amendment?	No	\Box Yes If ye	s, please enter	your cor	nmitte	ee numb	er:						
SECTION A: GENERAL	INFOF	RMATION											
A1. Candidate Committee/Conduit Name A2. Registrant Type (Choose One)													
		Candidate Referendum				n 🗆 Re	Recall Conduit						
A3. Email	3. Email A4. Phone				Political Action (PAC)				Independent Expenditure (IEC)				
			Political Party Legislative					tive Cam					
A5. Mailing Address			A6. City				A7. State A8. Zip						
Depository Institution Information													
A9. Institution Name	A9. Institution Name A10. Street Addr			ess A11. City				A12. State A13. Zip					
Treasurer/Administrator Informatio	n												
A14. Name			A15. Email A16				A16.	6. Phone					
A17. Mailing Address			A18. City					A19. Sta	te A2	20. Zip			
			v							1			
Other Officers (Optional)]					
Independent and local non-partisan car	ndidates: In	ndicate by an asteris	k (*) which officers	s are authori	ized to fi	ill a vacanc	y in no	omination a	ue to de	ath of candidate.			
A21. Name	A22. Tit		A23. Email					A24. Phone					
A25. Name	A26. Tit	le	A27. Email	A27. Email					8. Phone				
				120.1									
Filing Exemption					Δ	29 Exem	ntion	Affirmatio	1				
	utions ma	ke dishursements or	incur obligations	in an aooreo			-			for exemption			
Registrants that will not accept contributions, make disbursements, or incur obligations in an aggregate amount of more than \$2,000 in a calendar year are eligible for exemption from filing campaign finance No, this registrant is not eligible for exemption													
reports. Exempt status is effective only	for the cal	lendar year in which	n it is granted. Regi	istrants wish	ing	No, una	siegis	and is no	t engio	ie ioi exemption			
to remain on exempt status must renew	-	-	not claim exemption	n in the year	r of								
their election before the day they appea	r on the ba	allot.											
SECTION D. CANDIDAT		MATTER											
SECTION B: CANDIDAT	IE COI	VIVITTEES											
B1. Office Sought (include District/Branch)			B2. Political Party				B3. Election Date						
Candidate Information								•					
B4. Name			B5. Email B				B6. F	5. Phone					
B7. Mailing Address			B8. City					B9. State	B	0. Zip			
_										-			
Second Candidate Committee				B11. Is f	his vour	only regi	stered	candidate	commit	tee in Wisconsin?			
Second Candidate Committee B11. Is this your only registered candidate committee in Wisconsin? An individual who holds a state or local elective office may establish a second candidate Yes, this is my only candidate committee in Wisconsin													
<i>committee to pursue another state or local office.</i>													
B12. Other Office Held or Sought (in	clude Dist	rict/Branch) Only	complete R12 if you			-	zanai						
212. Gener Onice Heid of Bought (III	ciuut Dist	i ce bi anch j Oniy C	отрине 112 у уди	, esponueu	110 10	<i>D</i> 11.							
SECTION CODECALL C		TTEES											
SECTION C: RECALL C		ITEES											
C1. Name of Official Subject to Reca	11		C2. Office of	f Official Su	bject to	Recall			C	3. Support			

Form: CF-1 (Rev. 11/2018) Prescribed by: STATE OF WISCONSIN, Ethics Commission

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STATE OF WISCONSIN

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SECTION D: PAC, IEC, AND C	ONDUITS										
D1. Sponsoring Organization	D2. Email		D3. Ph	Phone							
D4. Mailing Address	D5. City			D6. State D7. Zip							
SECTION E: POLITICAL PARTY & LEGISLATIVE CAMPAIGN COMMITTEES											
E1. Political Party (Name candidates appear un	ider on a ballot)	E2. Does the Commit			ittee have a Segregated Fund?						
Segregated Fund Depository Institution Inform	ation (if applicable)										
E3. Institution Name	E4. Street Address	E5. Cit	E5. City		ate E7. Zip						
SECTION F: REFERENDA COMMITTEES											
F1. Nature of Referendum (if applicable)					F2. Support Oppose						
SECTION G: CERTIFICATION											
Accurate Information I certify that I am an authorized representative of the registrant and that to my knowledge all of the information contained within this registration is true, correct, and complete.											
Timely Amendments <i>I am aware of the requirement to amend this</i> <i>requirement to register within 10 days of med</i>					vithin, as well as the						
Records Retention I further acknowledge the requirement to ma of the most recent election in which this regis		strant in an organized a	and legible mann	er for three	e years from the date						
Ongoing Compliance <i>This registrant shall continue to maintain its</i> <i>Statutes.</i>	s registration and comply with	n all applicable reporti	ng requirements	under Chap	pter 11 of Wisconsin						
Treasurer/Administrator											
G1. Printed Name	G2. Signature				G3. Date						
Candidate (if applicable)											
G4. Printed Name	G5. Signature				G6. Date						



FORM INSTRUCTIONS

CAMPAIGN FINANCE REGISTRATION STATEMENT (CF-1)

Note: Use of this form is required by the Ethics Commission for registration of a political committee or conduit under Chapter 11 of Wisconsin Statute. Completion of this form is mandatory for committees that file on paper. It is not the Commission's intention to use any personally identifiable information from this form for any other purpose.

Item 1. Is this an amendment? Check the appropriate box. If "Yes" is checked, enter the committee ID number if you have one. If "No' is checked, proceed directly to Section A.

Section A: General Information. All candidates, committees, and conduits must complete section A.

Item A1: Committee/Conduit Name. All committees and conduits must have a name. It is not required that the name include the candidate or organization's name, but it is recommended, e.g., Friends of John Smith. A political party committee wishing to operate under the same name as a state political party committee must receive authorization from that state party (WIS. STAT. § 11.0101(26)(a)1).

Depository Institution Information. All committees and conduits must designate a depository institution. While it is recommended that all committees have a designated campaign depository account, candidates who will serve as their own treasurer may designate a single personal account to serve as the committee depository account and may intermingle personal and campaign funds (WIS. STAT. § 11.0201(2)(b)).

Treasurer/Administrator Information. Each committee must appoint a treasurer and each conduit must appoint an administrator. Any adult may serve as a treasurer or administrator. A candidate may serve as his or her own treasurer. If a candidate is serving as their own treasurer, this section may be left blank.

SectionB:CandidateCommittees.Candidate committeesmust complete section B. No othercommittee type should complete section B.

Section C: Recall Committees. Recall committees must complete section C. No other committee type should complete section C.

Section D: PAC, IEC, and Conduits. Political action committees, independent expenditure committees, and conduits must complete section D. No other committee type should complete section B. All fields in section D refer to the sponsoring organization's contact information.

Section E: Political Party and Legislative Campaign Committees. Only political party committees and legislative campaign committees should complete section E.

Item E2. A political party or a legislative campaign committee may establish a segregated fund for purposes other than making contributions to a candidate committee or making disbursements for express advocacy (WIS. STAT. § 11.1104(6)). It is recommended that the committee maintain the segregated fund in a depository account separate from the primary account, but it is not required.

Items E3 - E7. If the segregated fund is maintained with the same depository institution as the primary account, write "Same as primary account." in E3.

Section F: Referendum Committees. Only referenda committees should complete section F.

Section G: Certification. All committees and conduits must complete section G.