

**CAMPAIGN FINANCE REPORT
LOCAL COMMITTEES OF WISCONSIN**

Received 2/4/2024

Is This Report an Amendment: Yes No

Instructions for completing schedules are on the back of each schedule.

COMMITTEE IDENTIFICATION

Name of Committee
FRIENDS OF JAY BROWER

Street Address
[REDACTED]

City, State and Zip Code
MADISON, WI 53726

OFFICE USE ONLY

Please check if address is different than previously reported, and complete the Campaign Registration Statement in the back of this form.

NAME OF REPORT

- January Continuing 2024 Pre-Primary _____
 July Continuing _____ Spring Fall Special
 September Continuing _____ Pre-Election _____
- Termination Report
attach CF-13,
Termination Request

**SUMMARY OF RECEIPTS AND
DISBURSEMENTS**

1. RECEIPTS

	Column A This Period	Column B Calendar Year-To-Date
1A. Contributions (Including Loans) from Individuals	\$ 880.24	\$ 880.24
1B. Contributions from Committees (Transfers-In)	\$ 400	\$ 400
1C. Other Income and Commercial Loans	\$ 0	\$ 0
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$ 1280.24	\$ 1280.24

2. DISBURSEMENTS

2A. Gross Expenditures	\$ 0	\$ 0
2B. Contributions to Committees (Transfers-Out)	\$ 0	\$ 0
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 0	\$ 0

CASH SUMMARY

Cash Balance Beginning of Report	\$ 0
Total Receipts	\$ 1280.24
Subtotal	\$ 1280.24
Total Disbursements	\$ 0
CASH BALANCE END OF REPORT	\$ 1280.24
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$ 0
LOANS (Balance at the Close of This Period-3B)	\$ 0

I certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Candidate or Treasurer JAY BROWER	Signature of Candidate or Treasurer <i>Jay Brower</i> JAY4DISTRICT13@gmail.com	Date: 2/4/24 Daytime Phone: 618-521-8002
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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.

RECEIPTS
Contributions (Including Loans) From Individuals

Complete Committee Name
FRIENDS OF JAY BROWER

Instructions for completing schedules are on the back of each schedule.

Date	Full Name, Mailing Address and Zip Code Of Contributor	Occupation (if year-to-date total exceeds \$200)	Amount of Contribution	Y-T-D Total
12/1/2023	Keith Berry, 2402 W. Azeele St., Tampa, FL 33609 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____	Professor	\$250.00	\$250
12/3/2023	Lynette Adams, 2226 Hollister Ave., Madison, WI 53726 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____		\$100	\$100
12/20/23	Rick Rose, P. O. Box 1807, Eagle River, WI 54521 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____		20.24	\$20.24
12/31/23	Nancy Brower, 87 Acacia Ave., Oroville, CA 95966 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____	Not Employed	\$500	\$500
11/21/23	Jay Brower, [REDACTED] [REDACTED], Madison, WI 53726 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____		\$10	\$10
	 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____			
	 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____			
SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE			\$ 880.24	\$880.24
TOTAL ITEMIZED CONTRIBUTIONS			\$ 880.24	\$880.24
TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS			\$	
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS			\$ 880.24	\$880.24

SCHEDULE 1-B

RECEIPTS
Contributions from Committees
(Transfers-In)

Complete Committee Name
FRIENDS OF JAY BROWER

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Date	Full Name of Committee, Mailing Address and Zip Code	Amount of Contribution
12/30/2023	SERVICE EMPLOYEE INT'L UNION WISCONSIN STATE COUNCIL POLITICAL ACTION COMMITTEE 33 NOB HILL RD. MADISON, WI 5713 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	\$400
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
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	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
SUBTOTAL CONTRIBUTIONS (Transfers-In) THIS PAGE		\$400 \$
TOTAL CONTRIBUTIONS (Transfers-In) RECEIVED FROM COMMITTEES		\$400 \$