

**CAMPAIGN FINANCE REPORT  
LOCAL COMMITTEES OF WISCONSIN**

Is This Report an Amendment:     Yes             No

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

**RECEIVED**

JAN 11 2024

**DANE COUNTY CLERK  
OFFICE USE ONLY**

**COMMITTEE IDENTIFICATION**

Name of Committee  
FRIENDS OF SEAN BURKE

Street Address  
[REDACTED]

City, State and Zip Code  
MADISON, WI 53704

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 2024             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	\$ 10.00 (LOAN)	\$ 10.00
1B. Contributions from Committees (Transfers-In)	\$ 0.00	\$ 0.00
1C. Other Income and Commercial Loans	\$ 0.00	\$ 0.00
<b>TOTAL RECEIPTS</b> (Add totals from 1A, 1B and 1C)	\$ 10.00	\$ 10.00

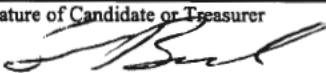
**2. DISBURSEMENTS**

2A. Gross Expenditures	\$ 0.00	\$ 0.00
2B. Contributions to Committees (Transfers-Out)	\$ 0.00	\$ 0.00
<b>TOTAL DISBURSEMENTS</b> (Add totals from 2A and 2B)	\$ 0.00	\$ 0.00

**CASH SUMMARY**

Cash Balance Beginning of Report	\$ 10.00
Total Receipts	\$ 0.00
Subtotal	\$ 10.00
Total Disbursements	\$ 0.00
<b>CASH BALANCE END OF REPORT</b>	\$ 10.00
<b>INCURRED OBLIGATIONS</b> (Balance at the Close of This Period-3A)	\$
<b>LOANS</b> (Balance at the Close of This Period-3B)	\$

*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 <b>Sean Burke</b>	Signature of Candidate or Treasurer  Email burkefordanecounty@gmail.com	Date: 01/11/24 Daytime Phone: 608-279-5415
---	---	---

**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 SEAN BURKE**

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
12/26/23	Sean Burke PO Box 572 Sun Prairie, WI 53590  Check if: <input type="checkbox"/> In-Kind <input checked="" type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____		\$10.00	\$10.00
	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# _____			
	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# _____			
	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# _____			
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____			
<b>SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE</b>			\$ 10.00	10.00
<b>TOTAL ITEMIZED CONTRIBUTIONS</b>			\$ 10.00	10.00
<b>TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS</b>			\$ 0.00	0.00
<b>TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS</b>			\$ 0.00	0.00