CAMPAIGN FINANCE REPO	ORT			
STATE OF WISCONSIN				
			Received 7/15	/2024
Is this report an Amendment? YES NO XX			Dane County (
COMMITTEE IDENTIFICATION				
Name of Committee Friends of Jeremy Levin				
Address		OFFICE USE ONLY		
City, State, ZIP Madison, WI 53726		WSEB # ID		
Please check if address is different than previously reported				
NAME OF REPORT Jan 2024 Continuing Pre-Primary 2		Spring	Fall	Special
(Please circle) July 2024 Continuing Pre-election	20	Spring	Fall	Special
SUMMARY OF RECEIPTS AND DISBURSEMENTS	Column A	Column B	Audited Totals	
1. RECEIPTS	This Period	YTD	Office Use Only	
A. Contributions including Loans from Individuals	\$ -	\$ -		
B. Contributions from Committees (Transfers-In)	\$ -	\$ -		
C. Other Income and Commercial Loans	\$ -			
TOTAL RECEIPTS (Add totals from 1A, 1B, and 1C)	\$ -	\$ -		
1. DISBURSEMENTS				
A. Gross Expenditures	\$ -	\$ -		
B. Contributions to Committees (Transfers-Out)	\$ 100.00			
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 100.00	\$ 100.00		
CASH SUMMARY				
Cash Balance at Beginning of Report	\$ 2,200.00			
Total Receipts	\$ -			
Subtotal	\$ 2,200.00			
Total Disbursements	\$ 100.00			
CASH BALANCE AT END OF REPORT	\$ 2,100.00			
INCURRED OBLIGATIONS (at close of period)	\$ -			
LOANS (at close of period)				
I certify that I have examined this report and to the best of my knowl			nd complete.	
Type or Print Name of Candidate or Treasurer	Signature of Candida	ate or Treasurer	Date	7/15/2024
Jeremy Levin	Jerenny	Pai	Daytime Phone 608.5	77.9335

NOTE: The information on this form is required by ss. 11.06, 11.20, Wisconsin. Stats.

 $Failure\ to\ provide\ this\ information\ may\ subject\ you\ to\ the\ penalties\ os\ 11.60,\ 11.62,\ Wisconsin.\ Stas.$

Friends of Jeremy Levin Contributions to Committees

SCHEDULE 2-B

In-Kind	DATE	NAME	<u>ADDRESS</u>	CITY	<u>ST</u>		PURPOSE	AMOUNT
	3/20/2024	Melissa Agard for Co. Exec	PO Box 12	Madison	WI	53701	Campaign Committee	\$100.00