

**CAMPAIGN FINANCE REPORT  
LOCAL COMMITTEES OF WISCONSIN**

Received 2/12/2024  
Dane County Clerk

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 Peterson for Dane County

Street Address  
[REDACTED]

City, State and Zip Code  
Cottage Grove, WI 53527

**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 \_\_\_\_\_     Pre-Primary 2024  
 July Continuing \_\_\_\_\_                     Spring                     Fall                     Special  
 September Continuing \_\_\_\_\_     Pre-Election \_\_\_\_\_

Termination Report  
attach CF-13  
Termination Request

**SUMMARY OF RECEIPTS AND  
DISBURSEMENTS**

	Column A This Period	Column B Calendar Year-To-Date
<b>1. RECEIPTS</b>		
1A. Contributions (Including Loans) from Individuals	\$1463.65	\$1463.65
1B. Contributions from Committees (Transfers-In)	\$	\$
1C. Other Income and Commercial Loans	\$	\$
<b>TOTAL RECEIPTS</b> (Add totals from 1A, 1B and 1C)	\$1463.65	\$1463.65
<b>2. DISBURSEMENTS</b>		
2A. Gross Expenditures	\$1463.65	\$1463.65
2B. Contributions to Committees (Transfers-Out)	\$	\$
<b>TOTAL DISBURSEMENTS</b> (Add totals from 2A and 2B)	\$1463.65	\$1463.65

**CASH SUMMARY**

Cash Balance Beginning of Report	\$155.07
Total Receipts	\$1463.65
Subtotal	\$1463.65
Total Disbursements	\$1463.65
<b>CASH BALANCE END OF REPORT</b>	\$155.07
<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 David Peterson	Signature of Candidate or Treasurer <i>David Peterson</i> Email petersonfordanecounty@gmail.com	Date: 2/12/24 Daytime Phone: 608-571-3981
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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.

Complete Committee Name  
**Friends of Peterson for Dane County**

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
1/4/2024	David Peterson ████████████████████ Cottage Grove, WI 53527  Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID#	Sales	\$23.00	\$23.00
1/18/2024	David Peterson ████████████████████ Cottage Grove, WI 53527  Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID#	Sales	\$572.38	\$595.38
2/4/2024	David Peterson ████████████████████ Cottage Grove, WI 53527  Check if: <input checked="" type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID#	Sales	\$23.00	\$618.38
2/10/2024	David Peterson ████████████████████ Cottage Grove, WI 53527  Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID#	Sales	\$845.27	\$1463.65
	   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>	\$ 1463.65	\$1463.65
<b>TOTAL ITEMIZED CONTRIBUTIONS</b>	\$ 1463.65	\$1463.65
<b>TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS</b>	\$	
<b>TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS</b>	\$ 1463.65	\$1463.65

**SCHEDULE 2-A**

**DISBURSEMENTS**  
Gross Expenditures

Complete Committee Name

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

Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
	Check if: <input type="checkbox"/> In-Kind Offset		
	Check if: <input type="checkbox"/> In-Kind Offset		
	Check if: <input type="checkbox"/> In-Kind Offset		
	Check if: <input type="checkbox"/> In-Kind Offset		
	Check if: <input type="checkbox"/> In-Kind Offset		
	Check if: <input type="checkbox"/> In-Kind Offset		
	Check if: <input type="checkbox"/> In-Kind Offset		
	Check if: <input type="checkbox"/> In-Kind Offset		
	Check if: <input type="checkbox"/> In-Kind Offset		

<b>SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE</b>	<b>\$</b>
<b>TOTAL ITEMIZED EXPENDITURES</b>	<b>\$ 1463.65</b>
<b>TOTAL UNITEMIZED EXPENDITURES</b>	<b>\$</b>
<b>TOTAL EXPENDITURES</b>	<b>\$</b>