

**Note:** Use of this form is required by the Ethics Commission for reporting campaign finance activity. Completion of this form is mandatory for local committees. It is not the Commission's intention to use any personally identifiable information from this form for any other purpose.

*Office Use Only*

Received 7/14/2024  
Dane County Clerk

Is this report an amendment?  Yes  No

COMMITTEE IDENTIFICATION			
Committee Name	Rick Rose for Dane County		
Mailing Address	[REDACTED], Madison, WI 53718		
Email	<a href="mailto:rickrosefordanecounty@gmail.com">rickrosefordanecounty@gmail.com</a>	Daytime Phone	414-403-6286

FILING PERIOD			
<input type="checkbox"/> January Continuing	<input type="checkbox"/> Spring Pre-Primary	<input type="checkbox"/> Fall Pre-Primary	<input type="checkbox"/> Special Pre-Primary
<input checked="" type="checkbox"/> July Continuing	<input type="checkbox"/> Spring Pre-Election	<input type="checkbox"/> September	<input type="checkbox"/> Special Pre-Election
	<input type="checkbox"/> Fall Pre-Election	<input type="checkbox"/> Special Post-Election	
Report Year		2024	
Is this a Termination Report?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

SUMMARY OF MONETARY RECEIPTS AND DISBURSEMENTS			<i>Office Use Only</i>
	This Period	Year-to-Date	
<b>Beginning Cash On-Hand</b>			
<b>1. Money Received (Receipts)</b>			
1-A. Monetary Contributions from Individuals	\$ 10.00		
1-B. Monetary Contributions from Committees (Transfers-In)	\$ -		
1-C. Other Income and Commercial Loans	\$ -		
<i>Total Monetary Receipts</i>	\$ 10.00	\$ -	
<b>2. Money Spent (Disbursements)</b>			
2-A. Gross Monetary Expenditures	\$ -		
2-B. Monetary Contributions to Committees (Transfers-Out)	\$ -		
<i>Total Monetary Disbursements</i>	\$ -	\$ -	
<b>Ending Cash On-Hand</b>	\$ 10.00		

SUMMARY OF OUTSTANDING DEBTS			
3-A. Incurred Obligations (Unpaid Bills)	\$	-	
3-B. Outstanding Loan Balance	\$	-	

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



Signature of the candidate or treasurer

Print Name

Date

**Monetary Contributions from Individuals (Including Loans from Individuals)**

Date	Name	Address	City	ST	Zip	Occupation	Comments	Amount
1/11/24	Kaarin Lorum	4809 Lien Road	Madison	WI	53704			\$ 10.00