

**CAMPAIGN FINANCE REPORT
LOCAL COMMITTEES OF WISCONSIN**

Received 11/2/2021
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 Kelly Danner

Street Address: [REDACTED]

City, State and Zip Code: Madison, WI 53705

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 _____
 July Continuing 2021 Spring Fall Special
 September Continuing _____ Pre-Election _____

Termination Report
Also complete Schedule 4

SUMMARY OF RECEIPTS AND DISBURSEMENTS

Column A
This Period

Column B
Calendar
Year-To-Date

1. RECEIPTS

1A. Contributions (Including Loans) from Individuals \$ — \$

1B. Contributions from Committees (Transfers-In) \$ — \$

1C. Other Income and Commercial Loans \$ — \$

TOTAL RECEIPTS (Add totals from 1A, 1B and 1C) \$ — \$

2. DISBURSEMENTS

2A. Gross Expenditures \$ 4,448.02 \$

2B. Contributions to Committees (Transfers-Out) \$ — \$

TOTAL DISBURSEMENTS (Add totals from 2A and 2B) \$ 4,448.02 \$

CASH SUMMARY

Cash Balance Beginning of Report \$ 4,448.02

Total Receipts \$ —

Subtotal \$ 4,448.02

Total Disbursements \$ 4,448.02

CASH BALANCE END OF REPORT \$ 0 —

INCURRED OBLIGATIONS

(Balance at the Close of This Period-3A) \$ —

LOANS (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
Kelly Nicole Danner

Signature of Candidate or Treasurer
Kelly Danner

Date: 11/2/2021

Email: kellyndanner@gmail.com

Daytime Phone: 518-847-745

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.

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
6/4/21	Centro Hispano of Dane County 810 W. Badger Rd. Madison, WI 53713 Check if: <input type="checkbox"/> In-Kind Offset	closing of account - donating remainder of funds	4,448.02
	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		

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE	\$ 4,448.02
TOTAL ITEMIZED EXPENDITURES	\$ 4,448.02
TOTAL UNITEMIZED EXPENDITURES	\$ -
TOTAL EXPENDITURES	\$ 4,448.02

SCHEDULE 4 TERMINATION REQUEST

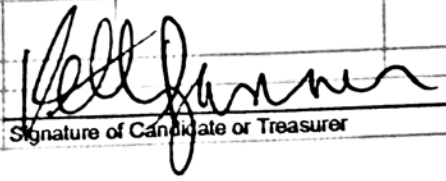
- A committee may terminate its registration and reporting requirements if the committee will no longer receive contributions, make disbursements or incur obligations, and the obligations and cash balance have been reduced to zero.
- Candidates may not terminate prior to the election in which they are participating.
- Please read carefully and, if necessary, indicate how residual committee funds have been disposed of or if outstanding loans or obligations have been forgiven. Sign and date the termination request at the bottom of this page.
- Make sure the termination box on the cover page of this report is checked.

Please note: An audit must be completed and all obligations, including settlement offers, fulfilled before termination can be granted. All records must be maintained until 3 years after the date of an election in which the registrant participates, even if termination is granted. (Per Wis. Stats. 11.0201(4), 11.0301(4), 11.0401(4), 11.0501(4), 11.0601(4), 11.0801(4), 11.0901(4))

DISPOSAL OF RESIDUAL FUNDS		
THIS INFORMATION SHOULD ALSO BE INCLUDED ON SCHEDULE 2-A AND/OR 2-B.		
DATE	RECIPIENT	AMOUNT
6/4/21	Centro Hispano	4,948.02

LOAN OR DEBT FORGIVENESS		
I hereby forgive all personal loans or have assumed responsibility for any and all debts of my campaign committee.		
DATE	Endorser, Guarantor, or Creditor	AMOUNT

TERMINATION REQUEST. I hereby request that the committee registration be terminated. I declare that the committee has not incurred any obligations and does not anticipate incurring any. The committee does not anticipate receiving any further contributions or making any disbursements. I further state that the cash balance has been reduced to zero and that all remaining funds have been disposed of in the manner prescribed by law.


Signature of Candidate or Treasurer

11/2/2021
Date