\	CAMPAIGN FINANCE REPOR VISCONSIN LOCAL COMMITTE Is this report an Amendment?	E	NO			Receive Dane C		
COMMITTEE IDENTIF	CATION					1		
Name of Committee	Friends of Elizabeth Doyle					1		
Address	Madison, WI 53703					1		1
City, State, ZIP	10 mg 14 sects					OFFICE U	SE ON	LY
Please check if address is dif	ferent than previously reported							
NAME OF REPORT	Jan 2023 Continuing Pre-Primary 2 July 20 Continuing Pre-election 2 September 20_ Continuing				Sprin ç Sprinç		Fall Fall	Special Special
SUMMARY OF RECEI	PTS AND DISBURSEMENTS	T	Column A	Г	Column B	Audited T	otals	$\overline{}$
1. RECEIPTS		7	his Period		YTD	Office Use		
	ling Loans from Individuals	\$	-	\vdash		The Late		Te least
	Committees (Transfers-In)	\$	-			W. HUST		- W
C. Other Income and (\$	-	\vdash		Maria de la composición dela composición de la composición de la composición de la composición dela composición de la composición dela composición dela composición de la composición de la composición dela composición del		THE HITCH
	dd totals from 1A, 1B, and 1C)	\$	-	\$	-	W/W-196		A Maria
2. DISBURSEMENTS		, ·						
A. Gross Expenditures	6	\$				E'N E	10	Toron Hotel
	mmittees (Transfers-Out)	\$	150.00					
	NTS (Add totals from 2A and 2B)	\$	150.00	\$	-			
CASH SUMMARY								
Cash Balance at Begin	nning of Report	\$	5,615.35				100	
Total Receipts		\$	-			TO SO WALL	- I	- 1
Subtotal		\$	5,615.35]				- 1
Total Disbursements		\$	150.00					- 1
CASH BALANCE AT E	ND OF REPORT	\$	5,465.35					
INCURRED OBLIGATI	ONS (at close of period)	\$	-			II Spanish	1.5	- 1
LOANS (at close of pe	riod)	\$]				
I certify that I have examinate Type or Print Name of Candidate Elizabeth Doyle	ned this report and to the best of my knowled or Treasurer	_	belief it is true, c			Daytime Pt	Date	1/16/23
,		edov	le999@gmail.	com	/)	608-609-0		

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.

Print the completed report and file with your local clerk or election commission by the filing deadline. ETHCF-2LE (01/16)

SCHEDULE 2-B

Contributions to Committees

N-KIND	DATE	NAME	Ethics ID#	ADDRESS	ZIIS	ES	ZIE	AMOUNT	THE STATE OF THE S	COMMENTS
	09/23/22	McCarville for Assembly	106564	513 Flamb	DeForest	M	53532	\$ 100.00	\$ 100.00	
	12/14/22	Juliana Bennett for District 2 Alder		515 N Lake St	Madison	×	53703	\$ 50.00	\$ 50.00	