CAMPAIGN FINANCE REPORT LOCAL COMMITTEES OF WISCONSIN **RECEIVED** X Yes Is This Report an Amendment: No JAN 29 2020 Instructions for completing schedules are on the back of each schedule. COMMITTEE IDENTIFICATION **DANE COUNTY CLERK** Name of Committee Friends of Gallagher Street Address OFFICE USE ONLY City. State and Zip Code Madison, WI 53711 Please check if address is different than previously reported, and complete the Campaign Registration Statement in the back of this form. NAME OF REPORT X January Continuing 2020 Pre-Primary Fall July Continuing Spring Special Termination Report also complete Schedule 4 September Continuing Pre-Election SUMMARY OF RECEIPTS AND Column A Column B **DISBURSEMENTS** This Period Calendar Year-To-Date 1. RECEIPTS s 6,107.00 S 1A. Contributions (Including Loans) from Individuals S S 1B. Contributions from Committees (Transfers-In) S S 1C. Other Income and Commercial Loans 6,107.00 S TOTAL RECEIPTS (Add totals from 1A, 1B and 1C) 2. DISBURSEMENTS 425.42 S 2A. Gross Expenditures S S 2B. Contributions to Committees (Transfers-Out) S S TOTAL DISBURSEMENTS (Add totals from 2A and 2B) CASH SUMMARY 1,564.40 Cash Balance Beginning of Report 6,107.00 S Total Receipts 7,671.40 S Subtotal 425.42 Total Disbursements 7,245.98 CASH BALANCE END OF REPORT **INCURRED OBLIGATIONS** S (Balance at the Close of This Period-3A) 2,407.00 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	Signature of Candidate or Treasurer	Date: January 29, 2020
T. Adam Gallagher		Daytime Phone: 608.266.4151

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 1-A

RECEIPTS Contributions (Including Loans) From Individuals

Complete Committee Name

Instructions for Date	completing schedules are on the back of each sch Full Name, Mailing Address and Zip Code	hedule. Occupation (if year-to-date total exceeds \$200)	Amount of Contribution	Y-T-D Total
	Of Contributor		Contribution	TOtal
11.05.19	Adam Gallagher	treasurer	\$1,500.00	\$1,500.00
	Check if: ☐ In-Kind X Loan Conduit – Ethics ID#			
11.20.19 Tracey Hoglund			\$35.00	\$35.00
	Check if: In-Kind Loan Conduit – Ethics ID#			
11.20.19	Evan Goyke		\$100.00	\$100.00
	Check if: In-Kind Loan Conduit – Ethics ID#			
11.20.19	Gretchen Lowe		\$50.00	\$50.00
	Check if: In-Kind Loan Conduit – Ethics ID#			
11.20.19	Gary Goyke Check if: ☐ In-Kind ☐ Loan☐ Conduit – Ethics ID#	lobbyist	\$200.00	\$200.00
11.20.19	Wayne Corey Check if: ☐ In-Kind ☐ Loan☐ Conduit – Ethics ID#		\$35.00	\$35.00
11.20.19	Kevin Pomeroy		\$50.00	\$50.00
	Check if: In-Kind Loan Conduit – Ethics ID#			
L	SUBTOTAL	s 1,970.00		
		s		
	TOTAL ANON	s		
	TOTAL CONTRIE	s		

RECEIPTS Contributions (Including Loans) From Individuals

Page 2 of 6

Complete Committee Name

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

	Completing schedules are on the back of each se			
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
11.20.19	Joe Parisi Check if: ☐ In-Kind ☐ Loan☐ Conduit – Ethics ID#		\$100.00	\$100.00
	Check II. III-Kilid Loan Conduit - Lilios ID#			
11.20.19	Jean Tretow-Schmitz Check if: ☐ In-Kind ☐ Loan☐ Conduit – Ethics ID#		\$35.00	\$35.00
	Check II. China Conduct - Euros ID#			
11.20.19	John Marszal		\$50.00	\$50.00
	Check if: In-Kind Loan Conduit – Ethics ID#			
11.20.19	Thom Weiss		\$100.00	\$100.00
	Observit Florid Florid Conduit Strice IDN	1		
	Check if: In-Kind Loan Conduit – Ethics ID#			
11.20.19	Marilyn Townsend		\$35.00	\$35.00
	Check if: In-Kind Loan Conduit – Ethics ID#	1		
11.20.19	Laura Gallagher		\$50.00	\$50.00
	Check if: In-Kind Loan Conduit – Ethics ID#			
11.20.19	Kay Lund		\$60.00	\$60.00
	Check if: ☐ In-Kind ☐ Loan☐ Conduit – Ethics ID#			
L			s 430.00	
SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE			\$ 430.00	
TOTAL ITEMIZED CONTRIBUTIONS			\$	
TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS			S	
	TOTAL CONTRIB	\$		

RECEIPTS Contributions (Including Loans) From Individuals

Page 3 of 6

Complete Committee Name

Friends of Gallagher
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
11.20.19	Anne Yerby Check if: ☐ In-Kind ☐ Loan☐ Conduit – Ethics ID#		\$100.00	\$100.00
	CHECK II. TIPKING CONGULT - LUICS 10#			
11.20.19	John Roberts		\$65.00	\$65.00
	Check if: ☐ In-Kind ☐ Loan☐ Conduit – Ethics ID#			
11.20.19	Emily Kuhn	alder	\$250.00	\$250.00
	Check if: In-Kind Loan Conduit – Ethics ID#			
11.20.19	Mary Jo Janisin		\$50.00	\$50.00
		7 5 1		
	Check if: In-Kind Loan Conduit – Ethics ID#			
11.20.19	Jim Spaulding		\$35.00	\$35.00
	Check if: In-Kind Loan Conduit – Ethics ID#	1		
11.20.19	Tim Kiefer		\$35.00	\$35.00
	Check if: In-Kind Loan Conduit – Ethics ID#			
11.20.19	Forbes McIntosh		\$100.00	\$100.00
	Check if: In-Kind Loan Conduit – Ethics ID#			
			s 635.00	
SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE				
TOTAL ITEMIZED CONTRIBUTIONS			S	
	TOTAL ANON	IYMOUS CONTRIBUTIONS \$10 OR LESS	S	
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS			S	

SCHEDULE 1-A

RECEIPTS Contributions (Including Loans) From Individuals

Page 4 of 6

Complete Committee Name

instructions to	completing schedules are on the back of each sc	nedule.		
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
11.20.19	Marla Frank		\$100.00	\$100.00
	Check if: In-Kind Loan Conduit – Ethics ID#			
11.21.19	Anthony Gray Check if: In-Kind Loan Conduit – Ethics ID#		\$100.00	\$100.00
	Oncok II. I III-kilia I Essai Sondak Zanos IS#			
11.21.19	Peter Gallagher	retired	\$2,000.00	\$2,000.00
	Check if: In-Kind Loan Conduit – Ethics ID#			
11.25.19	Daniel Dixon		\$35.00	\$35.00
	Check if: In-Kind Loan Conduit – Ethics ID#			
11.25.19	Sonia Haeckel Check if: In-Kind Loan Conduit - Ethics ID#		\$25.00	\$25.00
11.25.19	Jim Gallagher		\$25.00	\$25.00
	Check if: In-Kind Loan Conduit – Ethics ID#			
11.25.19	Judy Kelly		\$35.00	\$35.00
	Check if: In-Kind Loan Conduit – Ethics ID#			
SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE		s 2,320.00		
TOTAL ITEMIZED CONTRIBUTIONS			s	
TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS			s	
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS			\$	

RECEIPTS Contributions (Including Loans) From Individuals

Page 5 of 6

Complete Committee Name

	instructions for	completing schedules are on the back of each sc	riedule.		
	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
	11.25.19	Tim Roehl		\$100.00	\$100.00
		Check if: In-Kind Loan Conduit – Ethics ID#	1		
the second secon	11.30.19	Joe Owen Check if: In-Kind Loan Conduit – Ethics ID#		\$35.00	\$35.00
		CHECK II. SITE STATE STATE CONTROL - EUROS 154	1		
Contract of the last of the la	11.30.19	Joel Gallagher		\$100.00	\$100.00
		Check if: In-Kind Loan Conduit – Ethics ID#			
The second secon	11.30.19	Yogesh Chawala		\$40.00	\$40.00
		Check if: In-Kind Loan Conduit - Ethics ID#	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
		Check II: In-Aind Loan Conduit - Ethics ID#	1		
and the second name of the secon	12.18.19	Shawn Pfaff		\$100.00	\$100.00
		Check if: In-Kind Loan Conduit – Ethics ID#			
Section of the last sectio	12.19.19	Dianne Hesselbein		\$100.00	\$100.00
		Check if: In-Kind Loan Conduit – Ethics ID#	<u> </u>		
	12.19.19	Julie Miloszewicz		\$100.00	\$100.00
The same of the sa		Check if: In-Kind Loan Conduit – Ethics ID#			
			ITEMIZED CONTRIBUTIONS THE BACE	s 575.00	
	SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE			s	
	TOTAL ITEMIZED CONTRIBUTIONS			s	
			SUTIONS RECEIVED FROM INDIVIDUALS		
		TOTAL CONTRIB	OUTIONS RECEIVED FROM INDIVIDUALS	~	

SCHEDULE 1-A

RECEIPTS Contributions (Including Loans) From Individuals

Page 6 of 6

Complete Committee Name

instructions to	r completing schedules are on the back of each sc	nedule.		
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
12.21.19	Donna Serio		\$100.00	\$100.00
	Check if: ☐ In-Kind ☐ Loan ☐ Conduit – Ethics ID#	1		
12.21.19	Judy Washbush Check if: In-Kind Loan Conduit – Ethics ID#		\$35.00	\$35.00
	oneskii. [3] iii kiila [3] Esan [3] Sonadk Eurise ibii	1		
12.26.19	Adam Gallagher	treasurer	\$7.00	\$1,507.00
	Check if: ☐ In-Kind 【X Loan☐ Conduit – Ethics ID#			
12.31.19	Maureen Hillard		\$35.00	\$35.00
	Check if: In-Kind Loan Conduit – Ethics ID#			
	Check II: UIN-KING U Loan Conduit - Ethics ID#			
	Check if: ☐ In-Kind ☐ Loan☐ Conduit – Ethics ID#			
	Check if: ☐ In-Kind ☐ Loan⊟ Conduit – Ethics ID#			
	Oncor ii. 13 in ruino 13 coai 4 conduit - Culius ID#			
	Check if: In-Kind Loan Conduit – Ethics ID#			
SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE			_{\$} 177.00	
TOTAL ITEMIZED CONTRIBUTIONS			s	
TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS			\$	
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS			\$	

DISBURSEMENTS Gross Expenditures

Page 1_ of 1

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
11.05.19	Wells Printing 3121 Watford Way Madison, WI 53713 Check if: In-Kind Offset	printing services	190.36
11.20.19	Act Blue, https://secure.actblue.com	processing costs	9.29
	Check if: 🔲 In-Kind Offset		
11.25.19	Genna's Lounge 105 W Main Madison, WI 53703 Check if: 📵 In-Kind Offset	room rental	50.00
11.25.19	Act Blue, https://secure.actblue.com	processing costs	2.38
- Area	Check if:		
11.30.19	Act Blue, https://secure.actblue.com	processing costs	6.92
	Check if: 🔲 In-Kind Offset		
12.11.19	Jim Smith 4324 Melody Ln #105 Madison, WI 53704	campaign services	166.47
	Check if:		
	Check if: In-Kind Offset		
	Check if: In-Kind Offset		
	SUB	TOTAL ITEMIZED EXPENDITURES THIS PAGE	\$ 425.42
		TOTAL ITEMIZED EXPENDITURES	\$
		TOTAL UNITEMIZED EXPENDITURES	\$
		TOTAL EXPENDITURES	\$

SCHEDULE 3-B

Loans Individual, Committee or Commercial ADDITIONAL DISCLOSURE

Page _1_ of _1_

Complete Committee Name
Friends of Gallagher

Instructions fo	r completing schedules are on the back of each s	chedule.				
	Full Name, Mailing Address and Zip Code of Loan Sou	rce	Outstanding		Cumulative	Outstanding
	Adam Gallagher		Obligations Beginning of This	New Loans This	Payments This Period	Obligations End of This Period
Date	4417 Boulder Ter		Period	Period	2742-38420-114 min-2320-1-443	
11/05/19	Madison, WI 53711		\$ 900.00	\$ 1,500.00		\$ 2,400.00
	AND		Ψ 000.00	+ 1,000.00		7 -,
List All Endorse	rs or Guarantors (if any)					
Full Name, Mail of Guarantor	ing Address and Zip Code	Occupation				
		Amount Guarantee	ed Outstanding			
		\$				
Full Name, Mail of Guarantor	ing Address and Zip Code	Occupation				
		Amount Guarantee	ed Outstanding			
-	Full Name, Mailing Address and Zip Code of Loan Sou Adam Gallagher	гсе	Outstanding Obligations Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Obligations End of This Period
Date 12/26/19	4417 Boulder Ter Madison, WI 53711		\$ 2,400.00	\$ 7.00		\$ 2,407.00
	rs or Guarantors (if any)		Ψ 2,400.00	Ψ 1.00		Ψ 2, 101.00
List All Endorse	rs or Guarantors (ii any)					
Full Name, Mail of Guarantor	ing Address and Zip Code	Occupation				
		Amount Guarantee	ed Outstanding			
Full Name, Mail of Guarantor	ing Address and Zip Code	Occupation				
or oddramor		Amount Guarantee	ed Outstanding			
		\$				
	Full Name, Mailing Address and Zip Code of Loan Sou	rce	Outstanding Obligations Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Obligations End of This Period
Date / /						
List All Endorse	rs or Guarantors (if any)					
Full Name, Mail of Guarantor	ing Address and Zip Code	Occupation				
		Amount Guarantee	ed Outstanding			
		\$				
Full Name, Mail of Guarantor	ing Address and Zip Code	Occupation				
		Amount Guarantee	ed Outstanding			
		\$				
			SUBTOTAL O	UTSTANDING LOA	NS THIS PAGE	\$
			SSEI O I AL O	O TO TANDING LOA	ING THIS FAGE	*
				TOTAL OUTSTA	NDING LOANS	\$