

**CAMPAIGN FINANCE REPORT
WISCONSIN LOCAL COMMITTEE**

Is this report an Amendment? **NO**

COMMITTEE IDENTIFICATION

Name of Committee **Committee to Elect Bob Salvo**

Address

City, State, ZIP **Cambridge, WI 53523**

OFFICE USE ONLY

Please check if address is different than previously reported

NAME OF REPORT July 2020 Continuing Spring Fall Special

SUMMARY OF RECEIPTS AND DISBURSEMENTS

1. RECEIPTS

	Column A This Period	Column B YTD	Audited Totals Office Use Only	
A. Contributions including Loans from Individuals	\$ -			
B. Contributions from Committees (Transfers-In)	\$ -			
C. Other Income and Commercial Loans	\$ -			
TOTAL RECEIPTS (Add totals from 1A, 1B, and 1C)	\$ -	\$ -		

2. DISBURSEMENTS

A. Gross Expenditures	\$ 1,236.57			
B. Contributions to Committees (Transfers-Out)	\$ 50.00			
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 1,286.57	\$ -		

CASH SUMMARY

Cash Balance at Beginning of Report	\$ 1,286.57			
Total Receipts	\$ -			
Subtotal	\$ 1,286.57			
Total Disbursements	\$ 1,286.57			
CASH BALANCE AT END OF REPORT	\$ -			
INCURRED OBLIGATIONS (at close of period)	\$ -			
LOANS (at close of period)	\$ -			

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

Melanie Werth, Treasurer

Signature of Candidate or Treasurer

Melanie Werth

Date **6/30/2020**

Email: melwerth27@gmail.com

Daytime Phone 608-423-9780

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)

TERMINATION REQUEST

Sent To DANE Co
6/22/20

Complete Committee Name

Committee To Elect Bob Salov

Ethics ID Number

- A committee may terminate its registration and reporting requirements if the committee will no longer receive contributions, make disbursements or incur obligations, and the cash balance and obligations have been reduced to zero.
- Candidates may not terminate prior to the election in which they are participating.
- Non-candidate committees registered with the state must pay the \$100 filing fee if they have over \$2,500 in total expenses for the calendar year.
- 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.
- If you have any transactions since your last report (other than final distribution of funds, or loan forgiveness), be sure to complete the full finance report. (ETHCF-2)
- Please note: An audit must be completed and all obligations with the Board, 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
May 5, 2020	FOUNDATION FOR DANE COUNTY PARKS	\$1236.57

LOAN OR DEBT FORGIVENESS

I hereby forgive all personal loans or have assumed responsibility for any and all debts of my campaign committee.

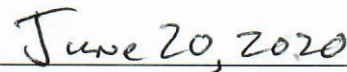
Date	Endorser, Guarantor, or Creditor	Amount

This is a non-candidate committee registered with the state and the committee made over \$2,500 in disbursements in the last calendar year. I have paid the \$100 filing fee.

I do not owe the \$100 filing fee.



Signature of Candidate or Treasurer



Date

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.

NOTE: The information on this form is required by s. 11.0105, Wis. Stats. Failure to provide the information may subject you to the penalties of ss.11.1400, 11.1401, Wis. Stats.