

Received 7/15/20  
Dane County Clerk

**CAMPAIGN FINANCE REPORT  
LOCAL COMMITTEES OF WISCONSIN**

**Is This Report an Amendment:**  Yes  No  
*Instructions for completing schedules are on the back of each schedule.*

**COMMITTEE IDENTIFICATION**  
Name of Candidate: Shelia Strubbs for County Board  
City: Madison, WI 53713

**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  Spring  Fall  Special  Termination Report  
 July Continuing 2020  Pre-Election  also complete Schedule 4  
 September Continuing

<b>SUMMARY OF RECEIPTS AND DISBURSEMENTS</b>		Column A This Period	Column B Calendar Year-To-Date
<b>1. RECEIPTS</b>			
1A. Contributions (Including Loans) from Individuals	\$	100.00	\$
1B. Contributions from Committees (Transfers-In)	\$	250.00	\$
1C. Other Income and Commercial Loans	\$		\$
<b>TOTAL RECEIPTS</b> (Add totals from 1A, 1B and 1C)	\$	350.00	\$
<b>2. DISBURSEMENTS</b>			
2A. Gross Expenditures	\$		\$
2B. Contributions to Committees (Transfers-Out)	\$		\$
<b>TOTAL DISBURSEMENTS</b> (Add totals from 2A and 2B)	\$		\$
<b>CASH SUMMARY</b>			
Cash Balance Beginning of Report	\$	207.99	
Total Receipts	\$		
Subtotal	\$	207.99	
Total Disbursements	\$		
<b>CASH BALANCE END OF REPORT</b>	\$	557.99	
<b>INCURRED OBLIGATIONS</b> (Balance at the Close of This Period-3A)	\$		
<b>LOANS</b> (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 <u>Shelia Strubbs</u>	Signature of Candidate or Treasurer <u>Shelia Strubbs</u>	Date: <u>7-15-2020</u>
	Email: <u>sheliastrubbs@yahoo.com</u>	Daytime Phone: <u>608-345-6464</u>

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.

ETHCF-2L (Rev. 01/16) The Wisconsin Ethics Commission prescribes this form. Completed forms must be filed with your local clerk.



SCHEDULE 1-B

RECEIPTS  
Contributions from Committees  
(Transfers-In)

Page \_\_\_ of \_\_\_

Committee Name  
Shelia Stubbs for County Board

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

Date	Full Name of Committee, Mailing Address and Zip Code	Amount of Contribution
4/28/20	Blacks for Political and Social Action of Dane Co, Inc 13 Esther Court Madison WI 53714 Check if <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	250.00
	Check if <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
	Check if <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
	Check if <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
	Check if <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
	Check if <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
	Check if <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
	Check if <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
	Check if <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
	Check if <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
SUBTOTAL CONTRIBUTIONS (Transfers-In) THIS PAGE		\$ 250.00
TOTAL CONTRIBUTIONS (Transfers-In) RECEIVED FROM COMMITTEES		\$ 250.00