

CITY OF MENOMONIE



NOMINATION PAPERS & INFORMATION REGARDING THE 2026 SPRING ELECTIONS

DISCLAIMER

As a candidate for office in the City of Menomonie, the following general guidelines are provided to assist you with the steps necessary to have your name appear on the election ballot.

Please be advised that it is the responsibility of each candidate to become familiar with the election laws and campaign finance requirements that are applicable to his/her campaign. The general information contained in this document is provided in good faith by the City Clerk; however, it should not be interpreted as legal advice nor does it release the candidate from his/her obligation to comply with the law. For technical questions, it may be advisable for a candidate to consult with his/her private attorney or the Wisconsin Elections or Ethics Commissions.

KATE MARTIN
CITY CLERK

CHRIS JOHNSON
DEPUTY CITY CLERK

CITY HALL
800 WILSON AVE
MENOMONIE, WI 54751
www.menomonie-wi.gov

OFFICE HOURS
MON-THURS 8:30AM-4:30PM
FRI 8:30AM-12:00PM
(715) 232-2221
clerk@menomonie-wi.gov

CITY OF MENOMONIE, WISCONSIN INFORMATION FOR CANDIDATES OF CITY OFFICES

2026 SPRING ELECTIONS

ELECTION DATES

**Primary Election Tuesday,
February 17, 2026**
(Only if required)

**Spring Election Tuesday,
April 7, 2026**

OFFICES TO BE FILLED | INCUMBENT

Aldersperson District 2	Matthew Crowe
Aldersperson District 4	Gretchen Yonko
Aldersperson District 6	Leland Schwebs
Aldersperson District 8	Mary Solberg
Aldersperson District 10	Ryland Erdman
Mayor	Randy Knaack

POLLING PLACES

Hours –7:00 AM to 8:00 PM

Wards 1 & 2 - Hotlby Hall, Rassbach Museum, 1820 John Russell Rd

Wards 3 & 4 - Menomonie City Hall, 800 Wilson Ave

Wards 5 & 7 - Merle Price Commons, 1110 Broadway St S

Ward 6 - United Methodist Church, 2703 Bongey Dr

Wards 8 & 9 - Leisure Services Center, 1412 6th St E

Wards 10 & 11 - Fanetti Community Center, Dunn County Rec Park, 620 17th St SE

CAMPAIGN SIGNS

Political signs on behalf of candidates for public office or issues on election ballots are subject to the following regulations:

- A permit is not needed provided that permission is obtained from the owners or tenants in possession of the property on which election campaign signs are erected. No sign shall be located on public property.
- Each sign must contain a disclaimer as explained on the following page.
- The placement of political and campaign signs may not adversely affect traffic or pedestrian safety. No sign is allowed in the public right-of-way (sidewalks, boulevard medians, traffic and bike lanes, etc.)
- Signs shall not be erected more than 30 days prior to an election and must be removed within two days following the election. If not removed within two days, the City Building Inspector shall remove the sign without notice and you will be subject to a citation.
Exception to this provision is during the time between a February Spring Primary and an April Spring Election.

DISCLAIMERS ON CAMPAIGN SIGNS & OTHER COMMUNICATIONS

Every communication that is paid for with political funds, including in-kind contributions, must contain a disclaimer or attribution statement identifying the source of the funds. This includes every printed advertisement, campaign sign, billboard, handbill, sample ballot, television or radio advertisement or other communication paid for with political funds. Disclaimers shall be included on each separate page of a political communication, including letterhead and enclosures. Also, disclaimers should be included on items such as T-shirts and bumper stickers. Abbreviations may not be used for any wording in the disclaimer.

Appropriate Form for Disclaimers

When the communication is paid for by a candidate without a committee, or paid for by an individual, the disclaimer should read: *"Paid for by Mary Smith"*

When the communication is paid for by the campaign committee of a candidate, the disclaimer should read: *"Paid for by Friends of Mary Smith for Mayor, James Jones, Treasurer"*

No disclaimer is required on:

- Personal correspondence not reproduced by machine for distribution;
- A single personal item, which is not reproduced or manufactured by machine or other equipment;
- Nomination papers, even if the papers contain biographical information;
- Envelopes which have campaign committee identification printed on them; or
- Pins, buttons, pens, balloons, and similar small items on which a disclaimer cannot be conveniently printed.

ELECTIONEERING

On Election Day, persons are prohibited from electioneering on public property within 100 feet of the entrance to the polling place. Bumper stickers are exempt. The placement of election signs on private property within the 100 foot radius is permissible.

TERM IN OFFICE

All newly elected and re-elected City officers will be sworn in within 10 days of the election, and assume their offices on **Tuesday, April 21, 2026**. The Mayor and Alders terms of office are two years and will serve until May 1, 2028. Regular Council meetings are held on the second and fourth Monday of the month beginning at 7:00 p.m.

As of 2025, the Mayor received \$18,000 annually, Alderpersons each received \$3,700 annually.

Alderpersons are appointed annually by the Mayor and approved by the Council to serve on other Boards, Commissions and Committees as liaisons.

ADDITIONAL INFORMATION

Additional information on elections may be obtained from the City Clerk's Office, the Wisconsin Elections Commission (<http://elections.wi.gov/> - 608-266-8005) or the Wisconsin Ethics Commission (<http://ethics.wi.gov/> - 608-266-8123)

2026 Ballot Access Checklist:

Municipalities Where Nomination Papers are Used



Each of the following forms must be completed and filed on time by a candidate for municipal office in order for the candidate's name to be placed on the ballot at the **February 17, 2026 Spring Primary** and the **April 7, 2026 Spring Election**.

In the City of Milwaukee, the filing officer is the Milwaukee City Election Commission. In all other municipalities, the filing officer is the municipal clerk (town, village or city). Candidates should contact their filing officer for further information or to obtain any of the necessary forms.

- ☐ **Register your Campaign Committee** A current registration (CF-1L) must be filed prior to raising or spending any funds, and no later than **5:00 p.m. on January 6, 2026** or the candidate's name will not be placed on the ballot. For questions, please contact the Ethics Commission: ethics@wi.gov | 608-266-8123.
- ☐ **Complete and Submit a Declaration of Candidacy (Form [EL-162](#))** to the filing officer no later than **5:00 p.m. on Tuesday, January 6, 2026** or the candidate's name will not be placed on the ballot. If the form is faxed or emailed, the original document must follow, postmarked no later than January 6, 2026. Wis. Stat. §§ 8.10(5), 8.21, 8.30(4), Wis. Admin. Code EL § 6.04.
- ☐ **Circulate and Submit Nomination Papers for Nonpartisan Office (Form [EL-169](#))** to the filing officer no later than **5:00 p.m. on Tuesday, January 6, 2026** or the candidate's name will not be placed on the ballot. Only original nomination papers (no photocopies, faxes, or emailed documents) will be accepted. Nomination papers may not be circulated before December 1, 2025. Wis. Stat. § 8.10(2), Wis. Admin. Code EL § 6.04(2).

The number of signatures required is as follows:

All village and town offices:		20 - 100
1 st Class Cities:	Citywide offices	1,500 - 3,000
	Aldersperson elected to district	200 - 400
2 nd and 3 rd Class Cities:	Citywide offices	200 - 400
	Aldersperson elected at large	100 - 200
	Aldersperson elected to district	20 - 40
4 th Class Cities:	Citywide offices	50 - 100
	Aldersperson elected to district	20 - 40

- ☐ **Municipal Judge Candidates:**
Complete and submit a Statement of Economic Interests (SEI) to the Ethics Commission using the website (<https://sei.wi.gov>). Incumbent candidates will receive a filing notice around December 1, 2025, and new candidates will receive an email notice within one or two days of registering their committee. The SEI must be received no later than 4:30 p.m. on Friday, January 9, 2026, or the candidate's name will not appear on the ballot. Wis. Stat. §§ 8.10(5), 8.30(3), 19.43(4). Candidates may also print the SEI form and instructions from the Ethics Commission website (<https://ethics.wi.gov>), and return those forms by email or fax. For more information, please contact the Ethics Commission at 608-266-8123 or ethics@wi.gov.

Important Note Regarding Statements of Economic Interests:

A municipality may enact an ordinance establishing a code of ethics for public officials that may require a candidate for municipal office, *in addition to the office of Municipal Judge*, to file a **Statement of Economic Interests (SEI)**. The ordinance may also provide that failure to timely file an SEI will prevent the candidate's name from being placed on the ballot. Wis. Stat. § 19.59(1m),(3)(b). Please contact the filing officer to learn if this requirement applies to you.

Declaration of Candidacy

(See instructions for preparation on back)

FOR OFFICE USE ONLY

Is this an amendment?

☐ **Yes** (if you have already filed a DOC for this election)

☐ **No** (if this is the first DOC you have filed for this election)

I, _____, being duly sworn, state that

Candidate's name

I am a candidate for the office of _____

Official name of office - Include district, branch or seat number

representing _____

If partisan election, name of political party or statement of principle - five words or less (Candidates for nonpartisan office may leave blank.)

and I meet or will meet at the time I assume office the applicable age, citizenship, residency and voting qualification requirements, if any, prescribed by the constitutions and laws of the United States and the State of Wisconsin, and that I will otherwise qualify for office, if nominated and elected.

I have not been convicted of a felony in any court within the United States for which I have not been pardoned.¹

My present address, including my municipality of residence for voting purposes is:

				Town of <input type="checkbox"/>	
				Village of <input type="checkbox"/>	
				City of <input type="checkbox"/>	

House or fire no.

Street Name

Mailing Municipality and State

Zip code

Municipality of Residence for Voting

My name as I wish it to appear on the official ballot is as follows:

(Any combination of first name, middle name or initials with surname. A nickname may replace a legal name.)

STATE OF WISCONSIN

County of _____

(County where oath administered)

}

ss.

(Signature of candidate)

Subscribed and sworn to before me this _____ day of _____, _____.

(Signature of person authorized to administer oaths)

**NOTARY SEAL
REQUIRED, IF OATH
ADMINISTERED BY
NOTARY PUBLIC**

☐ Notary Public or ☐ other official _____

(Official title, if not a notary)

If Notary Public: My commission expires _____ or ☐ is permanent.

The information on this form is required by Wis. Stat. § 8.21, Art. XIII, Sec. 3, Wis. Const., and must be filed with the filing officer in order to have a candidate's name placed on the ballot. Wis. Stats. §§ 8.05 (1)(j), 8.10 (5), 8.15 (4)(b), 8.20 (6), 120.06 (6)(b), 887.01.

EL-162 | Rev. 2019-08 | Wisconsin Elections Commission, P.O. Box 7984, Madison, WI 53707-7984
608-266-8005 | web: elections.wi.gov | email: elections@wi.gov

¹ A 1996 constitutional amendment bars any candidate convicted of a misdemeanor which violates the public trust from running for or holding a public office. However, the legislature has not defined which misdemeanors violate the public trust. A candidate convicted of any misdemeanor is not barred from running for or holding a public office until the legislature defines which misdemeanors apply.

Instructions for Completing the Declaration of Candidacy

All candidates seeking ballot status for election to any office in the State of Wisconsin must properly complete and file a **Declaration of Candidacy**. This form must be **ON FILE** with the proper filing officer no later than the deadline for filing nomination papers or the candidate's name will not appear on the ballot. A facsimile will be accepted if the FAX copy is received by the filing officer no later than the filing deadline **and** the signed original declaration is received by the filing officer with a postmark no later than the filing deadline.

Information to be provided by the candidate:

- Type or print your name on the first line.
- The title of the office and **any district, branch, or seat number** for which you are seeking election must be inserted on the second line. *For legislative offices insert the title and district number, for district attorneys insert the title and the county, for circuit court offices insert the title, county and branch number, and for municipal and school board offices insert the title and any district or seat number.*
- Type or print the political party affiliation or principle supported by you in five words or less on the third line. *Nonpartisan candidates may leave this line blank.*
- **Felony convictions: Your name cannot appear on the ballot if you have been convicted of a felony in any court in the United States for which you have not been pardoned. Please see footnote on page 1 for further information with respect to convictions for misdemeanors involving a violation of public trust. These restrictions only apply to candidates for state and local office.**
- Your current address, including your municipality of residence for voting purposes, must be inserted on the fourth line. This must include your entire mailing address (**street and number, municipality where you receive mail**) and the name of the municipality in which you reside and vote (town, village, or city of ____). If your address changes before the election, an amended Declaration of Candidacy must be filed with the filing officer. Wis. Stat. § 8.21. *Federal candidates are not required to provide this information, however an address for contact purposes is helpful.*
- Type or print your name on the fifth line as you want it to be printed on the official ballot. You may use your full legal name, former legal surname, or any combination of first name, middle name, and initials, surname or nickname with last name.

Note: The Wisconsin Elections Commission has determined that, absent any evidence of an attempt to manipulate the electoral process, candidates are permitted to choose any form of their name, including nicknames, by which they want to appear on the ballot.

No titles are permitted. In addition, names such as “Red” or “Skip” are permitted, but names which have an apparent electoral purpose or benefit, such as “Lower taxes,” “None of the above” or “Lower Spending” are not permitted. It is also not permissible to add nicknames in quotes or parentheses. For example, John “Jack” Jones or John (Jack) Jones are not acceptable, but John Jones, Jack Jones or John Jack Jones are acceptable.

This form must be sworn to and signed in the presence of a notary public or other person authorized to administer oaths, such as a county or municipal clerk. Wis. Stat. §§ 8.21(2), 887.01(1).

Information to be provided by the person administering the oath:

- The county where the oath was administered.
- The date the Declaration of Candidacy was signed and the oath administered.
- The signature and title of the person administering the oath. If signed by a notary public, the notary seal is required and the date the notary's commission expires must be listed.

All candidates for offices using the nomination paper process must file this form (*and all school district candidates must file the EL-162sd*) with the appropriate filing officer no later than the deadline for filing nomination papers. Wis. Stats. §§ 8.10 (5), 8.15 (4)(b), 8.20 (6), 8.21, 8.50 (3)(a), 120.06 (6)(b). Candidates nominated for local office at a caucus must file this form with their municipal clerk within 5 days of receiving notice of nomination. Wis. Stat. § 8.05 (l)(j).

NOMINATION PAPER FOR NONPARTISAN OFFICE

Candidate's name (required) ; no titles may be used.		Candidate's residential address (required) <i>No P.O. box addresses</i> Street, fire, or rural route number; box number (if rural route); and name of street or road		Candidate's municipality for <u>voting</u> purposes (required) <input type="checkbox"/> Town <input type="checkbox"/> Village _____ <input type="checkbox"/> City _____ (name of municipality)	
Candidate's mailing address, including municipality for mailing purposes (required) if different than residential address or voting municipality)		WI	Zip code	Type of election (required) <input type="checkbox"/> spring <input type="checkbox"/> special	Election date (required) <i>Do not use primary date.</i> <u>Mo/Day/Year</u>
Title of office (required)		Branch, district or seat number (required) if applicable <input type="checkbox"/> Branch <input type="checkbox"/> District <input type="checkbox"/> Seat		Name of jurisdiction or district in which candidate seeks office (required)	

I, the undersigned, request that the candidate, whose name and residential address are listed above, be placed on the ballot at the election described above as a candidate so that voters will have the opportunity to vote for ☐ him or ☐ her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

The municipality used for mailing purposes, when different than municipality of residence, is not sufficient. The name of the municipality of residence must always be listed.

Signatures of Electors	Printed Name of Electors	Residential Address <i>(No P.O. Box Addresses)</i> Street and Number or Rural Route <small>(Rural address must also include box or fire no.)</small>	Municipality of Residence <small>Check the type and write the name of your municipality for voting purposes.</small>	Date of Signing Mo/Day/Year
1.			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
2.			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
3.			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
4.			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
5.			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
6.			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
7.			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
8.			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
9.			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
10.			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	

CERTIFICATION OF CIRCULATOR

I, _____ certify: I reside at _____.

(Name of circulator) (Circulator's residential address - **Include number, street, and municipality.**)

I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. §6.03. I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under Wis. Stat. § 12.13(3)(a).

(Date) (Signature of circulator)

Page No.

INSTRUCTIONS FOR PREPARING NOMINATION PAPERS FOR NONPARTISAN OFFICE

This is a sample nomination paper form. It conforms to the statutory requirements for nomination papers for nonpartisan office. All information concerning the candidate must be completed in full before circulating this form to obtain signatures of electors. All information concerning the signing electors and the circulator must be completed in full before filing with the appropriate filing officer. This form may be reproduced in any way. A candidate's picture and biographical data may also be added to this form. The Wisconsin Elections Commission has determined that no disclaimer or other attribution statement is required on nomination papers. Candidates are advised to send a sample of their completed form the filing officer for review before circulation.

Page Numbers – Number each page consecutively, beginning with “1”, before submitting to the filing officer. A space for page numbers has been provided in the lower right-hand corner of the form.

Candidate's Name - Insert the candidate's name. A candidate may use his or her full legal name, or any combination of first name, middle name, and initials or nickname with last name. The Wisconsin Elections Commission has determined that, absent any evidence of an attempt to manipulate the electoral process, candidates are permitted to choose any form of their name, including nicknames, by which they want to appear on the ballot.

No titles are permitted. In addition, names such as “Red” or “Skip” are permitted, but names which have an apparent electoral purpose or benefit, such as “Lower taxes,” “None of the above” or “Lower Spending” are not permitted. It is also not permissible to add nicknames in quotes or parentheses between first and last names. For example, John “Jack” Jones or John (Jack) Jones are not acceptable, but John Jones, Jack Jones or John Jack Jones are acceptable.

Candidate's Address – Insert the candidate's residential address (*no P.O. Box addresses*) and the municipality for voting purposes. Indicate if the municipality of residence is a town, village, or city. If a candidate's mailing address is different from the residential address or voting municipality, a complete mailing address must also be given.

Date of Election - Insert the date of the election. If the nomination paper is being circulated for a spring election, the date is the first Tuesday in April. If the election is a special nonpartisan election, the date of the special election must be listed.

Title of Office - The name of the office must be listed **along with any branch, district, or seat number** (if applicable) that clearly identifies the office the candidate is seeking. If necessary, the name of the jurisdiction that identifies the office, such as Dane County Circuit Court Judge, Branch 3, must also be listed.

Name of Jurisdiction - The nomination papers must also indicate the municipality or jurisdiction in which the signing electors are qualified to vote, as it relates to the office sought by the candidate named on the nomination paper. For example, for a statewide office the jurisdiction is the State of Wisconsin. Others may be the county, town, village, city, aldermanic district, school district, or town sanitary district, as required.

Signatures and Printed Name of Electors - Only qualified electors of the jurisdiction or the district the candidate seeks to represent may sign the nomination papers. Each signer must also legibly print their name. Each elector must provide their **residential** address (*no P.O. Box addresses*), including any street, fire or rural route number, box number (if rural route) and street or road name, and municipality of residence. A post office box number alone does not show where the elector actually resides. The name of the Municipality of Residence must be listed for each signing elector and must clearly identify the town, village or city where the elector's voting residence is located. The date the elector signed the nomination paper, including month, day and year, must be indicated. Ditto marks that follow correct and complete address or date information are acceptable. The circulator may add any missing or illegible address or date information before the papers are filed with the filing officer.

Signature of Circulator - The circulator should carefully read the language of the *Certification of Circulator*. **THE CIRCULATOR MUST PERSONALLY PRESENT THE NOMINATION PAPER TO EACH SIGNER. THE NOMINATION PAPER MAY NOT BE LEFT UNATTENDED ON COUNTERS OR POSTED ON BULLETIN BOARDS.** The circulator's complete residential address including municipality of residence must be listed in the certification. **After** obtaining signatures of electors, the circulator must sign and date the certification.

Other Instructions - Candidates and circulators should review Ch. Wisconsin Elections Commission §§ 2.05, 2.07, Wis. Adm. Code.

- *Original* nomination papers must be in the physical custody of the appropriate filing officer by the filing deadline. A postmark on the filing deadline is **NOT** sufficient. Nomination papers **CANNOT** be faxed to the filing officer. Ch. Wisconsin Elections Commission § 6.04(2), Wis. Adm. Code.
- Nomination papers with the required number of signatures must be filed with the appropriate filing officer **no later than 5:00 p.m.** on the first Tuesday in January (or the next day if the first Tuesday is a holiday) before the spring election. Special elections may have different filing deadlines. Check with the filing officer.
- In order for a candidate's name to be placed on the ballot, a candidate must file a *Campaign Registration Statement* (ETHCF-1), a *Declaration of Candidacy* (EL-162), and *Nomination Papers* (EL-169) containing the appropriate number of signatures for the office sought no later than the filing deadline. Wis. Stat. § 8.10(3). Candidates for state office and municipal judge must also file a statement of economic interests with the Wisconsin Ethics Commission by the third business day after the nomination paper filing deadline. Wis. Stat. § 19.43. If any one of these required forms is not filed by the deadline, the candidate's name will not be placed on the ballot. Wis. Stat. § 8.30.
- If a candidate or circulator has any questions, he or she should contact the filing officer.

NOMINATION PAPER FOR NONPARTISAN OFFICE

Candidate's name (required) ; no titles may be used.		Candidate's residential address (required) <i>No P.O. box addresses</i> Street, fire, or rural route number; box number (if rural route); and name of street or road		Candidate's municipality for <u>voting</u> purposes (required) <input type="checkbox"/> Town <input type="checkbox"/> Village _____ <input type="checkbox"/> City _____ (name of municipality)	
Candidate's mailing address, including municipality for mailing purposes (required) if different than residential address or voting municipality)		WI	State (required)	Zip code	Type of election (required) <input type="checkbox"/> spring <input type="checkbox"/> special
Election date (required) <i>Do not use primary date.</i> <u>Mo/Day/Year</u>					
Title of office (required)		Branch, district or seat number (required) if applicable <input type="checkbox"/> Branch <input type="checkbox"/> District <input type="checkbox"/> Seat		Name of jurisdiction or district in which candidate seeks office (required)	

I, the undersigned, request that the candidate, whose name and residential address are listed above, be placed on the ballot at the election described above as a candidate so that voters will have the opportunity to vote for ☐ him or ☐ her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

The municipality used for mailing purposes, when different than municipality of residence, is not sufficient. The name of the municipality of residence must always be listed.

Signatures of Electors	Printed Name of Electors	Residential Address <i>(No P.O. Box Addresses)</i> Street and Number or Rural Route <small>(Rural address must also include box or fire no.)</small>	Municipality of Residence <small>Check the type and write the name of your municipality for voting purposes.</small>	Date of Signing Mo/Day/Year
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CERTIFICATION OF CIRCULATOR

I, _____ certify: I reside at _____.

(Name of circulator) (Circulator's residential address - Include number, street, and municipality.)

I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. §6.03. I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under Wis. Stat. § 12.13(3)(a).

(Date) (Signature of circulator)

Page No.

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Title of Office - The name of the office must be listed **along with any branch, district, or seat number** (if applicable) that clearly identifies the office the candidate is seeking. If necessary, the name of the jurisdiction that identifies the office, such as Dane County Circuit Court Judge, Branch 3, must also be listed.

Name of Jurisdiction - The nomination papers must also indicate the municipality or jurisdiction in which the signing electors are qualified to vote, as it relates to the office sought by the candidate named on the nomination paper. For example, for a statewide office the jurisdiction is the State of Wisconsin. Others may be the county, town, village, city, aldermanic district, school district, or town sanitary district, as required.

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Other Instructions - Candidates and circulators should review Ch. Wisconsin Elections Commission §§ 2.05, 2.07, Wis. Adm. Code.

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- In order for a candidate's name to be placed on the ballot, a candidate must file a *Campaign Registration Statement* (ETHCF-1), a *Declaration of Candidacy* (EL-162), and *Nomination Papers* (EL-169) containing the appropriate number of signatures for the office sought no later than the filing deadline. Wis. Stat. § 8.10(3). Candidates for state office and municipal judge must also file a statement of economic interests with the Wisconsin Ethics Commission by the third business day after the nomination paper filing deadline. Wis. Stat. § 19.43. If any one of these required forms is not filed by the deadline, the candidate's name will not be placed on the ballot. Wis. Stat. § 8.30.
- If a candidate or circulator has any questions, he or she should contact the filing officer.

NOMINATION PAPER FOR NONPARTISAN OFFICE

Candidate's name (required) ; no titles may be used.		Candidate's residential address (required) <i>No P.O. box addresses</i> Street, fire, or rural route number; box number (if rural route); and name of street or road		Candidate's municipality for <u>voting</u> purposes (required) <input type="checkbox"/> Town <input type="checkbox"/> Village _____ <input type="checkbox"/> City _____ (name of municipality)	
Candidate's mailing address, including municipality for mailing purposes (required) if different than residential address or voting municipality)		WI	Zip code	Type of election (required) <input type="checkbox"/> spring <input type="checkbox"/> special	Election date (required) <i>Do not use primary date.</i> <u>Mo/Day/Year</u>
Title of office (required)		Branch, district or seat number (required) if applicable <input type="checkbox"/> Branch <input type="checkbox"/> District <input type="checkbox"/> Seat		Name of jurisdiction or district in which candidate seeks office (required)	

I, the undersigned, request that the candidate, whose name and residential address are listed above, be placed on the ballot at the election described above as a candidate so that voters will have the opportunity to vote for ☐ him or ☐ her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

The municipality used for mailing purposes, when different than municipality of residence, is not sufficient. The name of the municipality of residence must always be listed.

Signatures of Electors	Printed Name of Electors	Residential Address <i>(No P.O. Box Addresses)</i> Street and Number or Rural Route <small>(Rural address must also include box or fire no.)</small>	Municipality of Residence <small>Check the type and write the name of your municipality for voting purposes.</small>	Date of Signing Mo/Day/Year
1.			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
2.			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
3.			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
4.			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
5.			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
6.			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
7.			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
8.			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
9.			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
10.			<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	

CERTIFICATION OF CIRCULATOR

I, _____ certify: I reside at _____.

(Name of circulator) (Circulator's residential address - **Include number, street, and municipality.**)

I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. §6.03. I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under Wis. Stat. § 12.13(3)(a).

(Date) (Signature of circulator)

Page No.

INSTRUCTIONS FOR PREPARING NOMINATION PAPERS FOR NONPARTISAN OFFICE

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Page Numbers – Number each page consecutively, beginning with “1”, before submitting to the filing officer. A space for page numbers has been provided in the lower right-hand corner of the form.

Candidate's Name - Insert the candidate's name. A candidate may use his or her full legal name, or any combination of first name, middle name, and initials or nickname with last name. The Wisconsin Elections Commission has determined that, absent any evidence of an attempt to manipulate the electoral process, candidates are permitted to choose any form of their name, including nicknames, by which they want to appear on the ballot.

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NOMINATION PAPER FOR NONPARTISAN OFFICE

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Title of office (required)		Branch, district or seat number (required) if applicable <input type="checkbox"/> Branch <input type="checkbox"/> District <input type="checkbox"/> Seat		Name of jurisdiction or district in which candidate seeks office (required)	

I, the undersigned, request that the candidate, whose name and residential address are listed above, be placed on the ballot at the election described above as a candidate so that voters will have the opportunity to vote for ☐ him or ☐ her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.

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I, _____ certify: I reside at _____.

(Name of circulator) (Circulator's residential address - **Include number, street, and municipality.**)

I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. §6.03. I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I intend to support this candidate. I am aware that falsifying this certification is punishable under Wis. Stat. § 12.13(3)(a).

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Page No.

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CAMPAIGN FINANCE REGISTRATION STATEMENT —
LOCAL CANDIDATE COMMITTEE
STATE OF WISCONSIN

***CAUTION:** A personal telephone number that is identified as a confidential telephone number on page 3 of this form should **not** be entered on page 1 of this form. Do **not** enter any personal telephone numbers of the candidate, the candidate committee treasurer, and any other custodian of books and accounts on page 1 of this form.

1. Is this an Amendment? ☐ No ☐ Yes

SECTION A: GENERAL INFORMATION

A1. Committee Name (Required for all Candidates - must be included in disclaimer on all communications)				
A2. Committee Email		A3. Committee Phone (Do not enter a confidential phone number)		
A4. Mailing Address		A5. City	A6. State	A7. Zip
Depository Institution Information				
A8. Institution Name	A9. Street Address	A10. City	A11. State	A12. Zip
Treasurer/Administrator Information				
A13. Name		A14. Treasurer Email	A15. Treasurer Phone (*See Caution)	
A16. Mailing Address		A17. City	A18. State	A19. Zip
Other Officers (Optional)				
A20. Name	A21. Title	A22. Email	A23. Phone (* See Caution above)	
A24. Name	A25. Title	A26. Email	A27. Phone (* See Caution above)	
Filing Exemption <i>Registrants which do not anticipate accepting or making contributions, making disbursements, or incurring obligations in an aggregate amount exceeding \$2,500 in a calendar year may claim an exemption from filing campaign finance reports. This exemption applies until the registrant exceeds the \$2,500 aggregate activity threshold, amends its registration, or is terminated.</i>			A28. Exemption Affirmation <input type="checkbox"/> Yes, this registrant is eligible for exemption. <input type="checkbox"/> No, this registrant is not eligible for exemption.	

SECTION B: CANDIDATE INFORMATION

B1. Office Sought (include District/Branch)		B2. Political Party	B3. Election Date
Candidate Information			
B4. Name		B5. Candidate Email	B6. Candidate Phone (* See Caution)
B7. Mailing Address		B8. City	B9. State B10. Zip
Second Candidate Committee <i>An individual who holds a state or local elective office may establish a second candidate committee to pursue another state or local office.</i>		B11. Is this your only registered candidate committee in Wisconsin? <input type="checkbox"/> Yes, this is my only candidate committee in Wisconsin. <input type="checkbox"/> No, this is my second candidate committee in Wisconsin.	
B12. Other Office Held or Sought (include District/Branch) Only complete B12 if you responded "No" to B11.			

SECTION C: CERTIFICATION

Accurate Information

- ☐ I certify that I am an authorized representative of the candidate committee and that to my knowledge all of the information contained within this registration is true, correct, and complete.

Timely Amendments

- ☐ I am aware of the requirement to amend this registration statement within 10 days of any change of information contained within, including any change to the candidate committee's eligibility for exemption from campaign finance reporting.

Records Retention

- ☐ I acknowledge the requirement to maintain the records of the candidate committee in an organized and legible manner for three years from the close of the most recent contribution limit period (June 30 following the April election, December 31 following the November election).

Continuing Compliance

- ☐ I acknowledge that I am required to continue to comply with all applicable requirements under Chapter 11 of the Wisconsin Statutes until this registration is terminated. I understand that I am not released from any liability simply because the election date has passed.

Treasurer

C1. Printed Name	C2. Signature	C3. Date

Candidate

C4. Printed Name	C5. Signature	C6. Date

Form Instructions

Candidates must complete all sections A, B, and C.

Item 1. Is this an amendment? Have you registered with this local clerk to run for office in a prior election?

Item A1: Committee Name. All candidates are required to register a committee. It is not required that the name include the candidate's name, but it is recommended. This committee name is required to be part of the disclaimer on all communications with express advocacy: 'Paid for by ...'

A28: Exemption. Candidates claiming exemption may not have more than \$2,500 of activity, in the aggregate per year. In a calendar year, if you raise \$1,600 and spend \$1,000 you have \$2,600 of aggregate activity and are not eligible to claim exemption.

Depository Institution Information. All candidates must designate a depository institution. While it is recommended that all candidates have a designated campaign depository account, candidates who will serve as their own treasurer may designate a single personal account to serve as the committee depository account while claiming a filing exemption and may intermingle personal and campaign funds (Wis. STAT. § 11.0201(2)(b)).

Treasurer Information. Each committee must appoint a treasurer. Any adult may serve as a treasurer. A candidate may serve as his or her own treasurer. If you are serving as your own treasurer, please write "Self" or "Candidate". A candidate serving as their own treasurer does not need to provide their name, address and contact information here because that information will already be provided in section B. Do not leave this section blank.

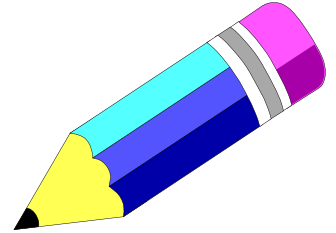
Section B: Candidate Information

B1. Be sure to include the name of the county, municipality, or school district. There are 72 counties with county supervisors, 100's of school boards, and 1000's of municipal boards.

B2. Party - "N/A" or "None" for nonpartisan offices (April). Democrat, Republican, Constitution, Green, Independent, or other ballot status party for partisan (fall) primary/election.

Section C: Certification. All candidates must complete section C. If the candidate is serving as their own treasurer, they would only need to sign once, as either the candidate or treasurer.

CAMPAIGN FINANCE CHECKLIST FOR 2026 MUNICIPAL AND SCHOOL DISTRICT CANDIDATES



Candidates should determine if they are required to make financial disclosure reports.

Candidates should contact their filing officer for further information or to obtain any of the necessary forms.

For municipal offices, the filing officer is the municipal clerk. For school district offices, the filing officer is the school district clerk. For City of Milwaukee offices, the filing officer is the City of Milwaukee Election Commission.

If NOT claiming the exemption from reporting requirements:

- ☐ Obtain a copy of the ***Campaign Finance Overview – Local Candidates Manual*** (Revised 2023) from your filing officer and carefully review it with your treasurer.
- ☐ Complete and submit a ***January Continuing Campaign Finance Report (Form CF-2L)*** to the filing officer no later than **January 15, 2026**, if registered before January 1, 2026. This report covers activity from July 1, 2025, or the date of registration (whichever is later), through December 31, 2025.
- ☐ Complete and submit a ***Pre-Primary Campaign Finance Report (Form CF-2L)*** to the filing officer no later than **February 9, 2026**, if a primary is held. This report covers activity from January 1, 2026, through February 2, 2026.
- ☐ Complete and submit a ***Pre-Election Campaign Finance Report (Form CF-2L)*** to the filing officer, no later than **March 30, 2026**. This report covers activity from February 3, 2026, through March 23, 2026, if a primary is held, **or** January 1, 2026, through March 23, 2026, if no primary is held.
- ☐ Complete and submit a ***July Continuing Campaign Finance Report (Form CF-2L)*** to the filing officer no later than **July 15, 2026**. This report covers activity from March 24, 2026, through June 30, 2026.

Committees must file “Continuing Reports” until a termination report (CF-2L) is filed.

For further information or to obtain any of the necessary forms, please contact:

Wisconsin Ethics Commission



CAMPAIGN FINANCE REPORT—STATEMENT OF NO ACTIVITY

STATE OF WISCONSIN

Note: Use of this form is required by the Ethics Commission for reporting no activity in a campaign finance filing period. Completion of this form is mandatory for committees that file on paper. It is not the Commission's intention to use any personally identifiable information from this form for any other purpose.

SECTION A: REGISTRANT INFORMATION

A1. Name of Committee/Conduit (in full)

A2. Committee/Conduit ID Number (if applicable)

A3. Email

A4. Phone

A5. Mailing Address

A6. City

A7. State

A8. Zip

SECTION B: REPORT INFORMATION

B1. Report Type (Choose One)

☐ January Continuing

☐ Spring Pre-Primary

☐ Fall Pre-Primary

☐ Special Pre-Primary

☐ July Continuing

☐ Spring Pre-Election

☐ September

☐ Special Pre-Election

☐ Fall Pre-Election

☐ Special Post-Election

B2. Special Election Date (if applicable)

Reporting Period

The start date for your campaign finance report should be the day following the end date of your previous campaign finance. Example: If your previous report had a start date of January 1 and an end date of June 30, this report should have a start date of July 1.

Review the filing calendar with reporting periods online at: <https://ethics.wi.gov/FilingCalendar>

B3. Reporting Period Start Date

B4. Reporting Period End Date

Party and Legislative Campaign Committees Only

B5. Is This Report for Your General Fund or Segregated Fund Account? (Choose One)

☐ General Fund

☐ Segregated Fund

SECTION C: LIMITED ACTIVITY REPORTING EXEMPTION (OPTIONAL)

Filing Exemption

Registrants which do not anticipate accepting or making contributions, making disbursements, or incurring obligations in an aggregate amount exceeding \$2,500 in a calendar year may claim an exemption from filing campaign finance reports. This exemption applies until the registrant exceeds the \$2,500 aggregate activity threshold, amends its registration, or is terminated.

C1. Exemption Request and Affirmation

☐ Yes, this registrant is eligible for exemption.

☐ No, this registrant is not requesting exemption

SECTION D: CERTIFICATION

I certify that the above named registrant has not engaged in any financial transactions during the period covered by this report and that the cash balance remains the same as previously reported. This report fulfills the requirements under Wis. STAT. § 11.0103(3)(d).

Authorized Representative

D1. Printed Name

D2. Signature

D3. Date



**CAMPAIGN FINANCE REGISTRATION STATEMENT —
LOCAL CANDIDATE COMMITTEE—CONFIDENTIAL PHONE CONTACTS**
STATE OF WISCONSIN

All information on pages 1 and 2 of this form is available to the public. Pursuant to 2023 Wisconsin Act 120, candidates, treasurers, and any other custodian of books and accounts (such as an assistant treasurer) are required to provide a personal telephone number. This page provides you the space to provide those required telephone numbers. Personal telephone numbers are confidential and are not subject to the right of inspection and copying under WIS. STAT. § 19.35(1). *See* WIS. STAT. § 11.0203(bd). However, a personal email address provided is subject to the right of inspection and copying under WIS. STAT. § 19.35(1) and may be disclosed.

Failure to provide a valid email may result in failure to receive filing reminders and notifications from the filing officer. Failure to receive a form or notice from a filing officer does not exempt a committee from a reporting requirement under this chapter (WIS. STAT. §11.0103(b)). The candidate committee is required to report any change in information previously submitted in a registration statement within 10 days following the change. WIS. STAT. § 11.0203(3).

Candidate Information	
Name	Personal Phone Number

Treasurer Information	
Name	Personal Phone Number

Other Custodians' Information	
Name	Personal Phone Number
Name	Personal Phone Number
Name	Personal Phone Number

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 Committee

Street Address

City, State and Zip Code

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

<input type="checkbox"/> January Continuing _____ <input type="checkbox"/> July Continuing _____ <input type="checkbox"/> September Continuing _____	<input type="checkbox"/> Pre-Primary _____ <input type="checkbox"/> Pre-Election _____	<input type="checkbox"/> Spring <input type="checkbox"/> Fall <input type="checkbox"/> Special <input type="checkbox"/> Termination Report attach CF-13, Termination Request
--	---	---

SUMMARY OF RECEIPTS AND DISBURSEMENTS

1. RECEIPTS

	Column A This Period	Column B Calendar Year-To-Date
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	\$	\$
2B. Contributions to Committees (Transfers-Out)	\$	\$
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$	\$

CASH SUMMARY

Cash Balance Beginning of Report	\$
Total Receipts	\$
Subtotal	\$
Total Disbursements	\$
CASH BALANCE END OF REPORT	\$
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	Signature of Candidate or Treasurer	Date:
	Email	Daytime Phone:

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.

Instructions for Completing Summary Page of Form ETHCF-2L

Instructions for Completing Schedules are on the Back of Each Schedule

Committee Identification

- ▶ Print or type the complete name and mailing address of your committee.
- ▶ If the report is an amendment to a previous report filed, check the “yes” box. If the report is NOT an amendment, check the “no” box.

Name of Report

- ▶ Check the box next to the name of the report being filed, and enter the correct calendar year. For information concerning filing dates and report names, refer to the CFIS website – <https://cfis.wi.gov>.

Summary of Receipts and Disbursements

- ▶ Committees should complete the detailed pages in Schedules 1-A through 3-B before completing this summary section of the report form.

Receipts

- 1A. Contributions (Including Loans) From Individuals:** Enter the amount of Total Contributions from Individuals (Schedule 1-A) in Column A of the Summary page. Add the amount entered in Column A to contributions previously reported for this calendar year, if any, and enter the amount in Column B, Calendar Year-to-Date.
- 1B. Contributions From Committees (Transfers-In):** Enter the amount from Total Contributions (Transfers-In) Received From Committees (Schedule 1-B) in Column A of the Summary page. Add the amount entered in Column A to contributions previously reported for this calendar year, if any, and enter the amount in Column B, Calendar Year-to-Date.
- 1C. Other Income and Commercial Loans:** Enter the amount of Total Other Income (Schedule 1-C) in Column A. Add the amount entered in Column A to other income previously reported for this calendar year, if any, and enter the amount in Column B, Calendar Year-to-Date.
- Total Receipts:** Add the amounts entered on lines 1-A, 1-B and 1-C, in Column A and enter the total in Total Receipts. Add the amount of Total Receipts previously reported, if any, and enter the amount in Column B, Calendar Year-to-Date.

Disbursements

- 2A. Gross Expenditures:** Enter the amount from Total Expenditures (Schedule 2-A) in Column A of the Summary page. Add the amount in Column A to expenditures previously reported for this calendar year, if any, and enter the amount in Column B, Calendar Year-to-Date.
- 2B. Contributions to Committees (Transfers-Out):** Enter the amount from Total Contributions (Transfers-Out) Made to Committees (Schedule 2-B) in Column A of the Summary page. Add the amount in Column A to contributions previously reported for this calendar year, if any, and enter the amount in Column B, Calendar Year-to-Date.
- Total Disbursements:** Add the amounts entered on lines 2-A and 2-B in Column A and enter the total in Total Disbursements. Add this amount to Total Disbursements previously reported, if any, and enter the amount in Column B, Calendar Year-to-Date.

Cash Summary

- Cash Balance Beginning of Report:** If this report is the first report filed by the committee, the cash balance will be zero. If this is not the first report filed by the committee, enter the cash balance from the end of the last report period. The beginning cash balance of a report must *always* be the *same* as the ending cash balance of the prior report.
- Total Receipts:** Enter the amount from Total Receipts in Column A of the Summary page.
- Subtotal:** Add Cash Balance Beginning of Report to Total Receipts and enter the amount.
- Total Disbursements:** Enter the amount from Total Disbursements in Column A of the Summary page.
- Cash Balance End of Report:** Subtract Total Disbursements from Subtotal and enter the amount. The cash balance at the end of the report period should *equal* the reconciled balance in the checking account *plus* any savings or investment accounts.
- Incurred Obligations:** Enter the amount from Total Incurred Obligations (Schedule 3-A) in Column A of the Summary page. Incurred obligations must be carried forward on *each* report until paid in full.
- Loans:** Enter the amount from the Total Outstanding Loans (Schedule 3-B) in Column A of the Summary page. Loans must be carried forward on *each* report until paid in full.

Sign and Date the Report

The treasurer or candidate must sign and date each report filed. Each report must be complete, correct, and in compliance with the reporting format. Please include a daytime phone number and a contact person if someone other than the treasurer prepares the report.

RECEIPTS
Contributions (Including Loans) From Individuals

Complete Committee Name

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
	<div>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____</div>			
	<div>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____</div>			
	<div>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____</div>			
	<div>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____</div>			
	<div>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____</div>			
	<div>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____</div>			
	<div>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____</div>			
<p align="center">SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE</p>			\$	
<p align="center">TOTAL ITEMIZED CONTRIBUTIONS</p>			\$	
<p align="center">TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS</p>			\$	
<p align="center">TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS</p>			\$	

Instructions for Completing Schedule 1-A

RECEIPTS - Contributions (Including Loans) From Individuals

General Instructions:

- ▶ Print or type the complete name of your committee in the box provided.
- ▶ Duplicate as many pages as you will need in order to report contributions, including loans from individuals, on this form.
- ▶ Enter the number of Schedule 1-A pages in the upper right corner of the form.

Date: Enter the date (month, day, year) each contribution was **RECEIVED**. *Do not* enter the date that appears on the contributor's check or the date deposited, unless it is the same as the date received (*is in committee's possession and control*).

Full Name, Mailing Address, and Zip Code:

1. Enter the full name and address of the contributor.
2. For single or cumulative contributions totaling over \$200 in a calendar year: Enter the full name and address of the contributor. Enter the **occupation**.

Calendar Year-to-Date Total: Add contributions previously received this calendar year, from this contributor to the contributions received in this report period. The Calendar Year-to-Date Total for an individual must always be entered. The Current Amount and Year-to-Date Total will be identical on the first report period of the calendar year. Once the individual's Calendar Year-to-Date Total exceeds \$200, you must enter the contributor's occupation.

Subtotal Itemized Contributions this page: Enter the total of all the contributions listed on this page. If additional pages are used, enter the subtotal for each separate page.

Total Itemized Contributions: Add the subtotals from all pages of Schedule 1-A. If more than one page, enter the total on only the last page of Schedule 1-A.

Total Anonymous Contributions \$10 or less: Enter the total of anonymous contributions of \$10 or less only on the last page of Schedule 1-A.

Total Contributions Received from Individuals: Add the total **Itemized** contributions to the Total **Anonymous Contributions \$10 or Less** and enter the amount **only** on the last page of Schedule 1-A.

Special Instructions:

- ◆ Contributions and loans from individuals on Schedule 1-A include any cash, personal or individual loans, purchase of tickets to fundraising events, memberships, gifts, advances, in-kind contributions, and all other personal contributions from an individual **including** the candidate. An in-kind contribution is any goods, property, or services provided to the committee free or for less than the fair market value. (*Volunteer services are not a contribution*).
- ◆ **In-kind contributions from individuals must also be reported as in-kind expenditures on Schedule 2-A to avoid distortion of the cash balance.**
- ◆ When the contribution is in-kind, a loan, or is received through a conduit, check the appropriate box in the section where the contribution is listed. If you receive a personal check or cash, no box needs to be checked.
- ◆ Contributions from individuals transferred through conduits are reported on Schedule 1-A under the individual contributor's name with the name of the conduit listed. The transmittal letter accompanying the conduit check, identifies the conduit and lists the individuals who are the original sources of the contributions. These contributions are subject to itemization on the same basis as other individual contributions; if over \$200, the occupation must be provided.
- ◆ Any individual loans, either from the candidate or from another individual, must be reported on Schedule 1-A **and** on Schedule 3-B, Additional Disclosure, Loans, until paid in full. Loans from individuals are subject to individual contribution limits (see Campaign Finance Overview).
- ◆ Each contributor's name, address, and amount must be listed separately. Contributions from joint accounts shall be reported as coming from the individual signing the check, unless the signor indicates otherwise. If the amount is divided, each individual must be itemized separately. Do not report a contribution as coming from more than one individual.
- ◆ All receipts, including those from raffles, auctions, garage sales or other similar events must be itemized unless the contribution is anonymous and totals \$10 or less.
- ◆ Do **not** report contributions from political action committees, political party committees, or other candidate committees on Schedule 1-A. These contributions must be reported on Schedule 1-B.

SCHEDULE 1-B**RECEIPTS**
Contributions from Committees
(Transfers-In)

Page ____ of ____

Complete Committee Name

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

Date	Full Name of Committee, Mailing Address and Zip Code	Amount of Contribution
	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	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
SUBTOTAL CONTRIBUTIONS (Transfers-In) THIS PAGE		\$
TOTAL CONTRIBUTIONS (Transfers-In) RECEIVED FROM COMMITTEES		\$

Instructions for Completing Schedule 1-B

RECEIPTS

Contributions From Committees (Transfers-In)

General Instructions:

- ▶ Print or type the complete name of your committee in the box provided.
- ▶ Duplicate as many pages as you will need in order to report contributions from committees (transfers-in) on this form.
- ▶ Enter the number of Schedule 1-B pages in the upper right corner of the form.
- ▶ Each contribution received from a committee **must be itemized** regardless of the amount.

Date:

Enter the date (month, day, year) each contribution was **received**. **DO NOT** enter the date which appears on the contributor's check or the date deposited, unless it is the same as the date received.

Complete Name and Address of Committee:

Enter the full name and address of each contributor.

Amount:

Enter the amount of the contribution this period.

Calendar Year-to-Date Total:

Add contributions previously received this calendar year, from this committee to the contributions received in this report period. The Calendar Year-to-Date Total for a committee must always be entered. The Current Amount and Year-to-Date Total will be identical on the first report period of the calendar year.

Subtotal Contributions (Transfers-In) This Page:

Enter the total of all the contributions (transfers-in) listed on this page. If additional pages are needed, enter the subtotal for each separate page.

Total Contributions (Transfers-In) Received from Committees:

Add the subtotals from all pages of Schedule 1-B. If more than one page, enter the total on only the last page of Schedule 1-B.

Special Instructions:

- ◆ Contributions transferred through **conduits** are reported as **individual contributions** on Schedule 1-A.
- ◆ In reporting contributions from committees, provide the **complete** name and address of each committee making a contribution.
- ◆ Contributions From Committees (Transfers-In) consist of any funds received from a political party committee, political action committee, candidate committee or a legislative campaign committee.
- ◆ In-kind contributions from a committee must also be reported as an in-kind offset in Schedule 2-A to avoid distortion of the cash balance. An in-kind contribution is any goods, service, or property provided to the committee free or for less than the fair market value. (*Volunteer services are not a contribution.*)
- ◆ When the contribution is in-kind, check the in-kind box in the section where the contribution is listed.
- ◆ Contributions received from sole-proprietorships, partnerships, or qualifying LLCs, must be reported as individual contributions in Schedule 1-A. Contributions from partnerships must reflect the partners' share in the partnership unless otherwise specified.
- ◆ Contributions may not be accepted from corporations, cooperatives, associations, unions, or tribes.

RECEIPTS
Other Income and Commercial Loans

Complete Committee Name

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

Date	Full Name, Mailing Address and Zip Code of Source of Income	Type of Income	Amount
SUBTOTAL OTHER INCOME THIS PAGE			\$
TOTAL ITEMIZED OTHER INCOME			\$
TOTAL OTHER INCOME			\$

Instructions for Completing Schedule 1-C RECEIPTS

Other Income and Commercial Loans

General Instructions:

- ▶ Print or type the complete name of your committee in the box provided.
- ▶ Duplicate as many pages as you will need in order to report other income and commercial loans on this form.
- ▶ Enter the number of Schedule 1-C pages in the upper right corner of the form.

Date:

Enter the date (month, day, year) other income and commercial loans were **RECEIVED**.

Full Name, Mailing Address and Zip Code of Source of Income:

Identify the source of income by providing the name and address of the commercial lending institution. Provide the name and address of any person or business from which other income was received.

Describe Type of Income:

Describe the type of income, e.g., loan from commercial lender for campaign expenses, refund from utility, refund of an over-payment to a vendor, interest on savings, or returned or lost contribution checks previously listed on Schedule 2-B, etc. Use more than one box or attach an additional sheet if needed.

Amount:

Enter the amount of other income and commercial loans for this period only.

Subtotal Other Income This Page:

Enter the total of all the other income itemized on this page. If additional pages are used, enter the subtotal for each separate page.

Total Itemized Other Income:

Add the subtotals from all pages of Schedule 1-C. If more than one page, enter the total on only the last page of Schedule 1-C.

Total Other Income:

Add the Total Other Income and enter the amount on only the last page of Schedule 1-C.

Special Instructions:

- ◆ **Personal loans** from individuals (including the candidate) must be reported on **Schedule 1-A**.
- ◆ Other income and commercial loans include loans received from any financial institution. Loans must also be listed on Schedule 3-B, Additional Disclosure-Loans, until paid in full.
- ◆ When a contribution given by your committee to another committee is returned to you, report the receipt of the returned contribution in this schedule. Please indicate (under the Type of Income box) the original date your contribution was given.
- ◆ When a loan from a commercial lending institution is guaranteed by individuals, the full name and mailing address of each guarantor and the balance of the amount guaranteed by each guarantor at the end of the reporting period must be reported on Schedule 3-B. The amount of the guarantee is considered a contribution from the guarantor and subject to individual contribution limits until the amount is repaid to the lending institution.
- ◆ Other income includes refunds and interest received. Receipts from fundraising events (auctions, dinners, etc.) and from the sale of commercial items for the purpose of raising funds for political purposes are contributions and must be reported on Schedule 1-A or 1-B.

SCHEDULE 2-A**DISBURSEMENTS**
Gross Expenditures

Page ____ of ____

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
	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		
	Check if: <input type="checkbox"/> In-Kind Offset		
	Check if: <input type="checkbox"/> In-Kind Offset		
SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE			\$
TOTAL ITEMIZED EXPENDITURES			\$
TOTAL UNITEMIZED EXPENDITURES			\$
TOTAL EXPENDITURES			\$

Instructions for Completing Schedule 2-A

DISBURSEMENTS

Gross Expenditures

General Instructions:

- ▶ Print or type the complete name of your committee in the box provided.
- ▶ Duplicate as many pages as you will need in order to report gross expenditures on this form.
- ▶ Enter the number of Schedule 2-A pages in the upper right corner of the form.

Date: Enter the date (month, day, year) the disbursement was made.

Full Name, Mailing Address, and Zip Code of Person or Business to Whom Payment Is Made: Enter the name and complete address of the person or business to whom payments were made.

Specific Purpose of Expenditure: Enter the specific purpose of the expenditure. A complete description of the **type** of expenditure or reimbursement must be given (i.e., food for fundraiser or campaign T-shirts for resale). You may use more than one box or attach an additional sheet if needed.

Subtotal Itemized Expenditures This Page: Enter the total of all the expenditures listed on this page. If additional pages are used, enter the subtotal for each separate page.

Total Itemized Expenditures: Add the subtotals from all pages of Schedule 2-A. If more than one page, enter the total itemized on only the last page of Schedule 2-A.

Total Unitemized Expenditures: Enter the total of unitemized expenditures that are specifically exempted by statute from the normal itemization requirements. (For example, expenses of \$20 or less (§11.0204(1)(a) 8.); expenses for a PAC or independent expenditure committee's fundraising or administrative expenses (§11.0101 (10)(a)); and spending on express advocacy before reaching the \$2,500 threshold (§11.0505(2)(a) and §11.0605(2)(a)). Place the total on only the last page of Schedule 2-A. Note: If you choose to itemize an expenditure, **DO NOT** include that amount **again** in the total of unitemized expenditures.

Total Expenditures: Add the Total **Itemized** Expenditures to the Total **Unitemized** Expenditures, and enter the amount on the last page of Schedule 2-A.

Special Instructions:

- ◆ Only expenditures of **more than \$20** must be itemized. Expenditures of **\$20 or less** should be totaled and reported as unitemized expenditures.
- ◆ Expenditures for general services, such as consulting, data processing, or reimbursement, should be broken down into the specific services rendered, e.g., salary, travel, data entry, polling.
- ◆ In-kind contributions reported in Schedule 1-A or 1-B, must also be reported as in-kind offsets in Schedule 2-A.
- ◆ Expenditures incurred for in-kind contributions to other registrants must be reported in Schedule 2-B, **NOT** 2-A. See instructions on Schedule 2-B.
- ◆ All expenditures must be made from the campaign depository and must be used for political purposes only.
- ◆ It is permissible for a candidate or an agent of a committee to pay for items from personal funds as long as receipts are submitted to the treasurer for reimbursement from the depository. Reporting of a reimbursement must include information that describes the nature of the original expenditure, and the original vendor of the good(s) or service(s).
- ◆ It is permissible to maintain a petty cash account to pay for minor items provided that funds for the petty cash account are drawn from the campaign depository and that a record of the transactions is kept. Expenditures over \$100 must be paid by negotiable instrument, and be itemized on the report. Expenditures of \$20 or less may be included in unitemized expenditures. If itemized, the purpose of each expenditure must be provided. Only the specific expenditures are reported. Contributions received, deposited, and later returned to the original contributor must be reported as an expense in Schedule 2-A.

SCHEDULE 2-B

DISBURSEMENTS Contributions To Committees (Transfers-Out)

Page ____ of ____

Complete Committee Name

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

Date	Full Name, Mailing Address and Zip Code	Amount	Y-T-D Total
	<div>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</div>		
	<div>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</div>		
	<div>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</div>		
	<div>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</div>		
	<div>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</div>		
	<div>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</div>		
	<div>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</div>		
	<div>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</div>		
	<div>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</div>		
	<div>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</div>		
<div>SUBTOTAL CONTRIBUTIONS (Transfers-Out) THIS PAGE</div>		\$	
<div>TOTAL CONTRIBUTIONS (Transfers-Out) MADE TO COMMITTEES</div>		\$	

Instructions for Completing Schedule 2-B

DISBURSEMENTS Contributions to Committees

General Instructions:

- ▶ Print or type the complete name of your committee in the box provided.
- ▶ Duplicate as many pages as you will need in order to use this form to report Contributions to Committees (Transfers-Out). Enter the number of Schedule 2-B pages in the upper right corner of the form.
- ▶ Each contribution made to another committee **must be itemized regardless of the amount**.

Date:

Enter the date (month, day, year) that each contribution was made to another committee.

Complete Name and Address of Committee:

Enter the full name and address of each committee.

Amount:

Enter the amount of the contribution given in this period.

Calendar Year-to-Date Total:

Add contributions previously given this calendar year to this committee, to the contributions given in this report period. The Calendar Year-to-Date Total for a committee must always be entered. The Current Amount and Year-to-Date Total will be identical on the first report period of the calendar year.

Subtotal Contributions (Transfers-Out) This Page:

Enter the total of all the contributions (Transfers-Out) listed on this page. If additional pages are used, enter the subtotal for each separate page.

Total Contributions (Transfers-Out) Made to Committees:

Add the subtotals from all pages of Schedule 2-B. If more than one page, enter the total on only the last page of Schedule 2-B.

Special Instructions:

- ◆ If a contribution is made to a candidate for local office, please print the word “Local” in the space for the ID#. This would include candidates for municipal, school district, and county office. Note: District Attorney and Circuit Court Judge are considered state offices.
- ◆ Contributions to Committees (Transfers-Out) consist of any funds contributed to a political party committee, political action committee, political group (referenda), candidate committee, or legislative campaign committee.
- ◆ When the contribution is in-kind, check the in-kind box in the section where the contribution is listed.
- ◆ When the contribution is a loan, check the loan box in the section where the contribution is listed.
- ◆ For each in-kind contribution, the name and address of the candidate or committee receiving the contribution must be listed, along with the name and address of the person or business to whom payment was made and the amount and date of the in-kind contribution.
 1. *If the committee purchases goods or services and gives them to another committee in the same reporting period as an in-kind contribution, the amount must be reported only once as an expense on Schedule 2-B.*
 2. *If the committee already possesses goods or services and gives them to another committee as an in-kind contribution, please note that this is a non-monetary contribution.*

SCHEDULE 3-A**Incurred Obligations Excluding Loans
ADDITIONAL DISCLOSURE**

Page ____ of ____

Complete Committee Name

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

		Outstanding Balance Beginning This Period	New Obligations or Additions This Period	Cumulative Payments This Period	Outstanding Balance At Close of This Period
Date / /	Full Name, Mailing Address and Zip Code of Creditor				
		Nature of Debt (Purpose)			
Date / /	Full Name, Mailing Address and Zip Code of Creditor				
		Nature of Debt (Purpose)			
Date / /	Full Name, Mailing Address and Zip Code of Creditor				
		Nature of Debt (Purpose)			
Date / /	Full Name, Mailing Address and Zip Code of Creditor				
		Nature of Debt (Purpose)			
Date / /	Full Name, Mailing Address and Zip Code of Creditor				
		Nature of Debt (Purpose)			
Date / /	Full Name, Mailing Address and Zip Code of Creditor				
		Nature of Debt (Purpose)			
Date / /	Full Name, Mailing Address and Zip Code of Creditor				
		Nature of Debt (Purpose)			
		SUBTOTAL ITEMIZED OBLIGATIONS THIS PAGE			
		\$			
		TOTAL ITEMIZED OBLIGATIONS			
		\$			
		TOTAL UNITEMIZED OBLIGATIONS \$20 OR LESS			
		\$			
		TOTAL INCURRED OBLIGATIONS			
		\$			

Instructions for Completing Schedule 3-A

Incurred Obligations Excluding Loans

ADDITIONAL DISCLOSURE

General Instructions:

- ▶ Print or type the complete name of your committee in the box provided.
- ▶ Duplicate as many pages as you will need in order to report incurred obligations on this form.
- ▶ Enter the number of Schedule 3-A pages in the upper right corner of the form.

Date: Enter the date (month, day, year) the obligation was incurred.

Full Name, Mailing Address, and Zip Code of Creditor:

Enter the complete name and address of the creditor.

Nature of Debt (Purpose):

Describe the specific purpose for which the obligation was incurred (See Schedule 2-A for instructions).

Balance Columns:

In the first column, enter the amount, if any, at the beginning of this report period. If this is a new obligation, there is no beginning balance. If this is an existing obligation, the beginning balance should equal the previous report period's closing balance. In the second column, enter the amount of any new obligations or additions to existing obligations. In the third column, enter any payments made this report period (payments this period must also be reported in Schedule 2-A). In the fourth column, enter the outstanding balance at the close of this report period. Note: If there is a remaining balance, it must be carried forward to the next report's beginning balance.

Subtotal Itemized Obligations:

Enter the total of all the incurred obligations listed on this page. If additional pages are used, enter the subtotal for each separate page.

Total Itemized Obligations:

Add the subtotals from all pages of Schedule 3-A. If more than one page, enter the total on only the last page of Schedule 3-A.

Total Unitemized Obligations \$20 or less:

Enter the total unitemized obligations of \$20 or less on only the last page of Schedule 3-A.

Total Incurred Obligations:

Add the Total **Itemized** Obligations to the Total **Unitemized** Obligations \$20 or Less and enter the amount on only the last page of Schedule 3-A.

Special Instructions:

- ◆ Incurred obligations are to be reported when an enforceable agreement has been reached. If the exact amount of the obligation has not yet been defined then the amount of the obligation must be estimated. Although the committee may not have received a bill, the amount recorded should be a good faith estimate of the amount owed.
- ◆ The balance of all incurred obligations should be reported from the time incurred until paid in full.
- ◆ Each obligation must be carried forward on subsequent reports until the obligation has been reduced to zero.
- ◆ When a payment is made on an obligation, the transaction should be reported as a payment on Schedule 3-A and as an expenditure on Schedule 2-A.
- ◆ If the committee has a dispute over the amount owed to a vendor, this must be noted in the "purpose".

Loans

Individual, Committee or Commercial

ADDITIONAL DISCLOSURE

Complete Committee Name

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

	Full Name, Mailing Address and Zip Code of Loan Source	Outstanding Obligations Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Obligations End of This Period
Date / /					

List All Endorsers or Guarantors (if any)

Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Amount Guaranteed Outstanding \$
Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Amount Guaranteed Outstanding \$

	Full Name, Mailing Address and Zip Code of Loan Source	Outstanding Obligations Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Obligations End of This Period
Date / /					

List All Endorsers or Guarantors (if any)

Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Amount Guaranteed Outstanding \$
Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Amount Guaranteed Outstanding \$

	Full Name, Mailing Address and Zip Code of Loan Source	Outstanding Obligations Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Obligations End of This Period
Date / /					

List All Endorsers or Guarantors (if any)

Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Amount Guaranteed Outstanding \$
Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Amount Guaranteed Outstanding \$

SUBTOTAL OUTSTANDING LOANS THIS PAGE
\$
TOTAL OUTSTANDING LOANS
\$

Instructions for Completing Schedule 3-B

Loans – Individual, Committee or Commercial

ADDITIONAL DISCLOSURE

General Instructions:

- ▶ Print or type the complete name of your committee in the box provided.
- ▶ Duplicate as many pages as you will need in order to report loans on this form.
- ▶ Enter the number of Schedule 3-B pages in the upper right corner of the form.

Date:

Enter the date (month, day, year) the loan was made.

Full Name, Mailing Address, and Zip Code of Loan Source:

Enter the complete name and address of the loan source.

Balance Columns:

In the first column, enter the actual amount at the beginning of this reporting period. If this is a new loan, the outstanding beginning balance is zero and the amount of the loan is recorded under the section “New Loans This Period”. If this is an existing loan, the outstanding beginning balance should equal the previous report period’s closing (outstanding) balance. In the third column, enter any payments made during this report period (payments made this period must also be reported in Schedule 2-A). In the fourth column, enter the outstanding balance at the end of this report period. Note: If there is a remaining balance, it must be carried forward to the next report’s beginning balance.

List All Endorsers or Guarantors (If Any):

In the space provided on the form, provide the full name, mailing address and zip code of any guarantors of loans. Enter the amount guaranteed which is outstanding at the end of the reporting period for each guarantor. See the notes below on how to apportion loan guarantees. If the amount guaranteed exceeds \$200, enter the guarantor’s occupation.

Special Instructions:

- ◆ A loan guarantee is considered a contribution from the guarantor until the loan is repaid.
- ◆ If more than one person guarantees a loan, the amount of the loan is assigned to the guarantors in equal shares, in the proportion that the guarantors bear to the total amount guaranteed unless a different share is specified in the loan instrument.
- ◆ When a payment which reduces the unpaid balance of the loan is made to the lending institution, the amount assigned to each guarantor is reduced in equal shares, unless a different share is specified in the loan instrument.
- ◆ The outstanding amount of a loan or loan guarantee **plus** the total contributions to the campaign by the guarantor may not exceed the individual contribution limit.
- ◆ Any reductions in loans which are not offset by expenditures in Schedule 2-A must be explained (e.g., candidate forgives self loans).