	TINANCE REPORT TEES OF WISCONSIN			
Is This Report an Amendment:	✓ No			
Instructions for completing schedules are on the back of eac	h schedule.			
COMMITTEE IDENTIFICATION				
Name of Committee Soglin for Mayor				
Street Address 3306 Gregory Street	-	(OFFICE USE OF	NLY
City, State and Zip Code Madison, WI 53711				
Please check if address is different than previously reported, and complet	e the Campaign Registration State	ment in the	back of this form.	
REPORT PERIOD				
_ ,	Spring Fall	Special	☐ Termination R	
September Continuing Pre-Election			also complete Sci	hedule 4
SUMMARY OF RECEIPTS AND DISBURSEMENTS	Column A This Period	Colum	nn B Calendar	
1. RECEIPTS		Yea	ar-To-Date	
1A. Contributions (Including Loans) from Individuals	\$7,100.00		\$167,676.01	
1B. Contributions from Committee (Transfers-In)	\$0.00		\$11,000.00	
1C. Other Income and Commercial Loans	\$0.00			
TOTAL RECEIPTS (add totals from 1A, 1B, and 1C)	\$7,100.00	\$7,100.00 \$178,676.01		
2. DISBURSEMENTS				
2A. Gross Expenditures	\$8,957.96		\$250,547.71	
2B. Contributions to Committees (Transfers-Out)	\$2,600.00		\$2,600.00	
TOTAL DISBURSEMENTS (add totals from 2A and 2B)	\$11,557.96	*	\$253,147.71	
CASH SUMMARY				
Cash Balance Beginning of Report	\$5,124.58			
Total Receipts	\$7,100.00			
Subtotal	\$12,224.58			
Total Disbursements	\$11,557.96			
CASH BALANCE END OF REPORT	\$666.62			
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$0.00			
LOANS (Balance at the Close of This Period-3B)	\$1,192.04			
I certify that I have examined this report and to the best of my	knowledge and belief it is tru	ie, correct	and complete	
Type or Print Name of Candidate or Treasurer Signa	ature of Candidate or Treasurer	Date: 01	/15/2020	
70.	SCOTT Merilin	~		

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 Government Accountability Board prescribes this form. Completed forms must be filed with your local clerk.

Email melissa@mmulliken.com Daytime Phone: (608) 206-1818

SCHEDULE 1-A

RECEIPTS Contributions (Including Loans) From Individuals

Page	2	of	7
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Complete Committee Name Soglin for Mayor

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
07/30/2019	Joel Rogers 2110 Chamberlain Ave Madison, WI 53726 Contributor Type: Individual Contribution Type: Monetary	Professor	\$1,000.00	\$1,000.00
	Check if: In-Kind Loan Conduit - Ethio	es ID#		
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
07/09/2019	George Gialamas 100 Thorstrand Rd Madison, WI 53705 Contributor Type: Individual Contribution Type: Monetary	Executive	\$4,000.00	\$4,000.00
	Check if: In-Kind Loan Conduit - Ethic	es ID#		
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
08/20/2019	Debra H Houden 1115 Willow Ln Madison, WI 53705 Contributor Type: Individual Contribution Type: Monetary	Faculty Associate	\$500.00	\$500.00
	Check if: In-Kind Loan Conduit - Ethic	es ID#		
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
07/19/2019	Christopher Houden 1115 Willow Ln Madison, WI 53705 Contributor Type: Individual Contribution Type: Monetary		\$500.00	\$0.00
	Check if: In-Kind Loan Conduit - Ethic	es ID#		

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE	\$6,000.00
TOTAL ITEMIZED CONTRIBUTIONS	\$7,100.00
TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS	\$0.00
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS	\$7,100.00

SCHEDULE 1-A

RECEIPTS Contributions (Including Loans) From Individuals

Page	3	of	7

Complete Committee Name Soglin for Mayor

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
07/19/2019	Jim Anixter 1432 Waverly Rd Highland Park, IL 60035 Contributor Type: Individual Contribution Type: Monetary	Business Owner	\$1,000.00	\$3,000.00
	Check if: In-Kind Loan Conduit - Ethio	es ID#		
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
08/27/2019	Steven Skolaski 5106 Coney Weston Pl Madison, WI 53711 Contributor Type: Individual Contribution Type: Monetary		\$100.00	\$100.00
	Check if: In-Kind Loan Conduit - Ethio	es ID#		

\$1,100.00	SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE
\$7,100.00	TOTAL ITEMIZED CONTRIBUTIONS
\$0.00	TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS
\$7,100.00	TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

SCHEDULE 2-A

DISBURSEMENTS Gross Expenditures

Page	4	of	7

Complete Cor	nmittee Name		
Soglin fo	r Mayor		
Date 12/31/2019	Full Name, Mailing Address and Zip Code of Person or Business to Whom Payment is Made Paul R Soglin 121 Standish Ct Madison, WI 53705 Payee Type: Individual Expense Category: Monetary Expense Purpose: Administrative Expenses	Specific Purpose of Expenditure administrative entry to correct prior reports - loan repayment	Amount \$4,607.96
Date 07/19/2019	Full Name, Mailing Address and Zip Code of Person or Business to Whom Payment is Made Paul R Soglin 121 Standish Ct Madison, WI 53705 Payee Type: Individual Expense Category: Monetary Expense Purpose: Administrative Expenses	Specific Purpose of Expenditure Repayment of loan	Amount \$3,500.00
Date 07/16/2019	Full Name, Mailing Address and Zip Code of Person or Business to Whom Pavment is Made Scott Herrick 14 Hidden Hollow Trl Madison, WI 53717 Payee Type: Individual Expense Category: Monetary Expense Purpose: Administrative Expenses	Specific Purpose of Expenditure Repayment of loan	Amount \$200.00

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE

TOTAL ITEMIZED EXPENDITURES

TOTAL UNITEMIZED EXPENDITURES

7.2 G. ... 2....22 27.. 2...21. G. ...

TOTAL EXPENDITURES

\$8,957.96

\$8,957.96

\$8,307.96

SCHEDULE 2-A

DISBURSEME Gross Expend

ENTS litures	Page _	5	of	7

Complete Cor	mmittee Name		
Soglin fo	r Mayor		
Date 07/25/2019	Full Name, Mailing Address and Zip Code of Person or Business to Whom Payment is Made Christopher Houden 1115 Willow Ln Madison, WI 53705 Payee Type: Individual Expense Category: Monetary Expense Purpose: Administrative Expenses	Specific Purpose of Expenditure Deposited items returned by bank because it was written on an inactive account	Amount \$500.00
	Check if: In-Kind Offset		
Date 07/12/2019	NGP VAN Inc 1101 15th St NW Ste 500 Washington, DC 20005 Payee Type: Business Expense Category: Monetary Expense Purpose: IT - Campaign Software	Specific Purpose of Expenditure Data Base	Amount \$150.00
	Check if: In-Kind Offset		

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE

TOTAL ITEMIZED EXPENDITURES

TOTAL UNITEMIZED EXPENDITURES

TOTAL EXPENDITURES

\$8,957.96 \$0.00 \$8,957.96

\$650.00

SCHEDULE 2-B

DISBURSEMENTS Contributions to Committees (Transfers-out)

Page	6	of	7

Complete Committee Name	
Soglin for Mayor	

Date	Full Name, Mailing Address and Zip Code	Amount	Y-T-D Total
09/17/2019	Soglin for Governor 3306 Gregory St Madison, WI 53711 Payee Type: Registered Expense Category: Contribution Made Expense Purpose: Contribution to Committee	\$1,600.00	\$2,600.00
	Check if: In-Kind Loan		
Date	Full Name, Mailing Address and Zip Code	Amount	Y-T-D Total
08/14/2019	Soglin for Governor 3306 Gregory St Madison, WI 53711 Payee Type: Registered Expense Category: Contribution Made Expense Purpose: Contribution to Committee	\$1,000.00	\$2,600.00
	Check if: In-Kind Loan		

SCHEDULE 3-B

Loans Individual, Committee or Commercial ADDITIONAL DISCLOSURE

Page	7	of	7

Complete Committee Name

Soglin for Mayor

Instructions for completing schedules are on the back of each schedule.							
Full Name, Mailing Address and Zip Code of	Full Name, Mailing Address and Zip Code of Loan Source		New Loans This Period	Cumulative Payment This Period	Outstanding Obligations End of This Period		
Date Paul R Soglin							
121 Standish Ct 05/06/2014 Madison, WI 53705		\$9,300.00	\$0.00	\$8,107.96	\$1,192.04		
List All Endorsers or Guarantors (if any)							
Full Name, Mailing Address and Zip Code of Guarantor	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 Payment This Period	Outstanding Obligations End of This Period		
Date Scott Herrick 14 Hidden Hollow Trl							
10/29/2013 Madison, WI 53717		\$200.00	\$0.00	\$200.00	\$0.00		
List All Endorsers or Guarantors (if any)							
Full Name, Mailing Address and Zip Code of Guarantor	Occupation						
	Amount Gua	aranteed Outstanding					