

Complete Committee Name

Friends of Ryan Koglin

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
12-15	Edward Niles 2129 Linden Ave Madison, WI 53704 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____	Chief Data and Tech Officer	\$20.00	\$20.00
12-15	Jodi Vandermolen 2225 Atwood #201 Madison, WI 53704 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____	Operations Manager	20.00	20.00
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____			
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	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____			

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE \$ *40.00* *40.00*

TOTAL ITEMIZED CONTRIBUTIONS \$ *40.00* *40.00*

TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS \$ *0.00* *0.00*

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS \$ *40.00* *40.00*