

**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

Vote Vafadari

Street Address

[REDACTED]

City, State and Zip Code

[REDACTED]

Please check if address is different than previously reported, and complete the Campaign Registration Statement in the back of this form.

NAME OF REPORT

- January Continuing _____ Pre-Primary _____
 July Continuing _____ Spring Fall Special
 September Continuing _____ Pre-Election _____

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	\$ 420.00 ✓	\$ 3690.57 ✓
1B. Contributions from Committees (Transfers-In)	\$ 400.00 ✓	\$ 496.56 ✓
1C. Other Income and Commercial Loans	\$ 0.00	\$ 0.00
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$ 820.00 ✓	\$ 4187.13 ✓

2. DISBURSEMENTS

2A. Gross Expenditures	\$ 173.83 ✓	\$ 1754.08 ✓
2B. Contributions to Committees (Transfers-Out)	\$ 0.00	\$ 0.00
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 173.83 ✓	\$ 1754.08 ✓

CASH SUMMARY

Cash Balance Beginning of Report	\$ 1,786.88 ✓
Total Receipts	\$ 820.00 ✓
Subtotal	\$ 2,606.88 ✓
Total Disbursements	\$ 173.83 ✓
CASH BALANCE END OF REPORT	\$ 2,433.05 ✓
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 Nicole Vafadari	Signature of Candidate or Treasurer [REDACTED]	Date: 7/1/24
	Email [REDACTED]	Daytime Phone: [REDACTED]

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.

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
4/23/2024	Realtors Direct Giver Program Conduit Account (SEB# 0900010) 4801 Forest Run Road, ST 201 Madison, WI 53704-7227 Contributer: Hiam H. Garner Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____		\$50.00	
4/23/2024	Greater Madison Chamber of Commerce 1 S. Pinckney St., Unit 330 Madison, WI 53711 Contributer: Matt Younkle Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____		\$100.00	
4/23/2024	Julia Arata-Fratta [REDACTED] Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____		\$100.00	
4/23/2024	Kathleen Ramirez 7396 Old Sauk Rd Madison, WI 53711 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____		\$20.00	
4/23/2024	Donald Dantzler [REDACTED] Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____		\$50.00	
4/23/2024	Juan Carlos Medina 616 Hamlets Circle Verona, WI 53593 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____		\$100.00	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____			

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE	\$	\$420.00	
TOTAL ITEMIZED CONTRIBUTIONS	\$	\$420.00	
TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS	\$	\$0.00	
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS	\$	\$420.00	

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

Page ____ of ____

Complete Committee Name

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Date	Full Name of Committee, Mailing Address and Zip Code	Amount of Contribution
4/23/2024	Realtors Association of SC WI 4801 Forest Run Rd., Ste 101 Madison, WI 53704-7337 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	\$400.00
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
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	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		\$ 400.00
TOTAL CONTRIBUTIONS (Transfers-In) RECEIVED FROM COMMITTEES		\$ 400.00

SCHEDULE 2-A

DISBURSEMENTS
Gross Expenditures

Complete Committee Name

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Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
3/20/2024	Amazon 10 Terry Avenue North, Seattle, WA 98109 Check if: <input type="checkbox"/> In-Kind Offset	Amazon Purpose: Thank You Cards	\$34.79
3/29/2024	Squarespace, Inc. 8 Clarkson St New York, NY 10014, USA Check if: <input type="checkbox"/> In-Kind Offset	Squarespace Purpose: Campaign Website	\$33.00
4/4/2024	Etsy 117 Adams Street, Brooklyn, NY 11201 Check if: <input type="checkbox"/> In-Kind Offset	Etsy Purpose: Return Address Stamp	\$40.04
4/29/2024	Squarespace, Inc. 8 Clarkson St New York, NY 10014, USA Check if: <input type="checkbox"/> In-Kind Offset	Squarespace Purpose: Campaign Website	\$33.00
5/28/2024	Squarespace, Inc. 8 Clarkson St New York, NY 10014, USA Check if: <input type="checkbox"/> In-Kind Offset	Squarespace Purpose: Campaign Website	\$33.00
	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			\$ 173.83
TOTAL ITEMIZED EXPENDITURES			\$ 173.83
TOTAL UNITEMIZED EXPENDITURES			\$ 0.00
TOTAL EXPENDITURES			\$ 173.83