# Campaign Finance Registration Statement — Local Candidate Committee

State of Wisconsin

***CAUTION:** A personal telephone number that is identified as a confidential telephone phone 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**

*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.*

**A28. Exemption Affirmation**

☐ Yes, this registrant is eligible for exemption.

☐ 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**

*An individual who holds a state or local elective office may establish a second candidate committee to pursue another state or local office.*

**B11. Is this your only registered candidate committee in Wisconsin?**

☒ Yes, this is my only candidate committee in Wisconsin.

☐ 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 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** |
| | |