CAMPAIGN FINANCE REPORT STATE OF WISCONSIN CF-2

COMMITTEE IDENTI	FICATION		Y
Filing Period Name:	Spring Pre-Election 2024 Covers all activity from 02/2	Spring Pre-Election 2024 Covers all activity from 02/20/2024 through 03/18/2024	
Name of Committee/Corporation:	Troy Cross for Judge		1
Street Address:	N7563 Pine Ridge Circle		Committee ID: 0104573
City, State and Zip:	Portage, WI 53901		
SUMMARY OF RECEIPTS A	AND DISBURSEMENTS	Column A This Period	Column B Calendar Year-To-Date
1. RECEIPTS			
1A. Contributions (Including Loans) from Individuals		\$4,601.	42 \$4,601.42
1B. Contributions from Committees (Transfers-In)		\$0.	\$0.00
1C. Other Income and Cor	nmercial Loans	\$0.	\$0.00
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$4,601.4	\$4,601.42
2. DISBURSEMENTS			•
2A. Gross Expenditures		\$4,601.	\$4,601.42
2B. Contributions to Com	mittees (Transfers-Out)	\$0.	\$0.00
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)		\$4,601.4	\$4,601.42
CASH SUMMARY			
Cash Balance Beginning of	f Report*	\$0.	00
Total Receipts		\$4,601.	42

Total Receipts \$4,601.42 Subtotal \$4,601.42 Total Disbursements \$4,601.42 CASH BALANCE END OF REPORT* \$0.00 INCURRED OBLIGATIONS (Balance at the Close of This Period-3A) \$0.00

(Balance at the Close of This Period-3B)

LOANS

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:	Daytime Phone:
Cross, Troy	Troy Cross	Email:	cuttercross4@yahoo.com

\$0.00

NOTE: The information on this form is required by 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.

CF-2 (Rev. 04/16) This form is prescribed by the Wisconsin Ethics Commission, P.O. Box 7984, Madison, WI 53707-7984, 608-266-8005.

^{*}Cash Balance as reported by committee

SCHEDULE 1-A

RECEIPTS Contributions From Individuals

Date	Full Name	Address	Occupation	Amount	YTD
Monetary					
02/20/2024	Cross, Troy	N7563 Pine Ridge Circle, Portage, WI 53901		\$2,171.75	\$2,171.75
02/26/2024	Cross, Troy	N7563 Pine Ridge Circle, Portage, WI 53901		\$2,350.54	\$2,350.54
03/04/2024	Cross, Troy	N7563 Pine Ridge Circle, Portage, WI 53901		\$79.13	\$79.13
			Sub Total	\$4,601.42	
			Total Anonymous Contributions	\$0.00	
			Grand Total	\$4,601.42	
			Non-Monetary (-):	\$0.00	
			Loan Forgiven (-):	\$0.00	
			Total	\$4,601.42	

SCHEDULE 1-B

RECEIPTS Contributions from Committees (Transfers-In)

Date	Full Name	Address	Amount	YTD
		Grand Total	\$0.00	
	Non-Monetary (-):			
		Total	\$0.00	

SCHEDULE 1-C

RECEIPTS Other Income and Commercial Loans

Date	Full Name	Address	Amount	YTD
		Total	\$0.00	

SCHEDULE 2-A

DISBURSEMENTS Gross Expenditures

Date	Communication Date	Full Name	Address	Vendor Name	Vendor Address	Expense Purpose	Amount
Monetary							
02/20/2024		Sage Media LLC	109 E. Walnut St., North Freedom, WI 53951			Consulting Fees - Media	\$2,171.75
02/26/2024		The O'Brion Agency	628 E. Albert St., Portage, WI 53901			Media - Billboards / Outdoor Advertising	\$2,350.54
03/04/2024		The O'Brion Agency	628 E. Albert St., Portage, WI 53901			Media - Billboards / Outdoor Advertising	\$79.13
						Sub Total	\$4,601.42
Grand Total						\$4,601.42	
Non-Monetary (-):						\$0.00	
						Total	\$4,601.42

SCHEDULE 2-B

DISBURSEMENTS Contributions To Committees (Transfers-Out)

Date	Full Name	Address	Vendor Name	Vendor Address	Amount
Grand Total				\$0.00	
Non-Monetary (-):				\$0.00	
Registrant In-Kind Sub Total (-):				\$0.00	
				Total	\$0.00

SCHEDULE 3-A

ADDITIONAL DISCLOSURE

Incurred Obligations Excluding Loans

Complete Committee Name: Troy Cross for Judge

Beginning Incurred Obligation Amount: \$0.00

Date	Full Name	Address	Amount
		Grand Total	\$0.00

Date	ate Full Name	
	Grand Total	\$0.00
	Outstanding Incurred Obligations End of Report	\$0.00

SCHEDULE 3-B

ADDITIONAL DISCLOSURE

Loans

Individual, Committee or Commercial

Complete Committee Name:

Troy Cross for Judge

Beginning Loan Balance: \$0.00

Date	Full Name	Address	Amount
		Grand Total	\$0.00

Date	Full Name	Amount Paid
	Grand Total	\$0.00
	Outstanding Loans End of Report	\$0.00