

**CAMPAIGN FINANCE REPORT  
STATE OF WISCONSIN**

Is This Report an Amendment:  Yes  No

Instructions for completing schedules are on the back of each schedule.

RECEIVED 7/19  
12:00 PM 7/19/12  
OFFICE USE ONLY

**COMMITTEE IDENTIFICATION**

Name of Committee: Ferguson for Assembly

Street Address: 2138 Old County Circle

City, State and Zip Code: Kaukauna WI 54130

GAB ID Number: 0105305

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

**REPORT PERIOD**

- January Continuing \_\_\_\_\_  Pre-Primary \_\_\_\_\_  Spring \_\_\_\_\_  Fall \_\_\_\_\_  Special \_\_\_\_\_  Termination Report also complete Schedule 4  
 July Continuing 2012  Pre-Election \_\_\_\_\_

| <b>SUMMARY OF RECEIPTS AND DISBURSEMENTS</b>           | Column A<br>This Period | Column B<br>Calendar<br>Year-To-Date |
|--|-------------------------|--------------------------------------|
| <b>1. RECEIPTS</b>                                     |                         |                                      |
| 1A. Contributions (Including Loans) from Individuals   | \$ 320.00               | \$ 320.00                            |
| 1B. Contributions from Committees (Transfers-In)       | \$ 0                    | \$ 0                                 |
| 1C. Other Income and Commercial Loans                  | \$ 0                    | \$ 0                                 |
| <b>TOTAL RECEIPTS</b> (Add totals from 1A, 1B and 1C)  | \$ 320.00               | \$ 320.00                            |
| <b>2. DISBURSEMENTS</b>                                |                         |                                      |
| 2A. Gross Expenditures                                 | \$ 0                    | \$ 0                                 |
| 2B. Contributions to Committees (Transfers-Out)        | \$ 0                    | \$ 0                                 |
| <b>TOTAL DISBURSEMENTS</b> (Add totals from 2A and 2B) | \$ 0                    | \$ 0                                 |

| <b>CASH SUMMARY</b>   |           |
|---|-----------|
| Cash Balance Beginning of Report  | \$ 0      |
| Total Receipts  | \$ 320.00 |
| Subtotal  | \$ 320.00 |
| Total Disbursements   | \$ 0      |
| <b>CASH BALANCE END OF REPORT</b>                                       | \$ 320.00 |
| <b>INCURRED OBLIGATIONS</b><br>(Balance at the Close of This Period-3A) | \$ 0      |
| <b>LOANS</b> (Balance at the Close of This Period-3B)                   | \$ 0      |

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<br>Ryan Ferguson | Signature of Candidate or Treasurer<br><i>[Signature]</i> | Date: 7/26/12<br>Daytime Phone: (920) 420-9770 |
|---|---|--|

NOTE: The information on this form is required by ss.11.06, 11.20, Wis. Stats. Failure to provide ss.11.60, 11.61, Wis. Stats. GAB-2S (Rev. 12/09)

Form prescribed by the Government Accountability Board, 1 608-266-8005.



