

Campaign Finance Report—Statement of No Activity State of Wisconsin

Note: Use of this form is required by the Ethics Commission for reporting no activity in a campaign finance filing period. Completion of this form is mandatory for committees that file on paper. It is not the Commission's intention to use any personally identifiable information from this form for any other purpose.

SECTION A: REGISTRANT INFORMATION					
A1. Name of Committee/Conduit (in full)					
Friends for Shawn Rolland					
A2. Committee/Conduit ID Number (if applicable)	A3. Email	A3. Email A4.			
	shawnrolland@vaho	shawnrolland@yahoo.com		414-795-5971	
A5. Mailing Address	0,	A6. City		A7. State A8. Zip	
1715 N 68th Street	Wauwatosa		WI	53213	
17 13 14 0001 00000	Waawatooa		VVI		
SECTION B: REPORT INFORMATION					
B1. Report Type (Choose One) X January Continuing July Continuing Spring Pre-Primary Spring Pre-Election		— •	re-Election ost-Election	B2. Special Election Date (if applicable)	
Reporting Period The start date for your campaign finance report should be the day following the end date of your previous campaign finance. Example: If your previous report had a start date of January 1 and an end date of June 30, this report should have a start date of July 1.		B3. Reporting Period Start Date July 1, 2022 B4. Reporting Period End Date			
			31, 2022		
Party and Legislative Campaign Committees Only					
B5. Is This Report for Your General Fund or Segregated Fund Account? (Choose One)					
X General Fund Segregated Fund					
SECTION C: LIMITED ACTIVITY REPORTING EXEMPTION (OPTIONAL)					
Filing Exemption C1. Exemption Rec			equest and Affirmation		
Registrants which do not anticipate accepting or making contrib incurring obligations in an aggregate amount exceeding \$2,500	Yes, this registrant is eligible for exemption.				
exemption from filing campaign finance reports. This exemp exceeds the \$2,500 aggregate activity threshold, amends its regis	X No, this registrant is not requesting exemption				
Za vo, une requesting exemption					
SECTION D: CERTIFICATION					
I certify that the above named registrant has not engaged in any financial transactions during the period covered by this report and that the cash balance remains the same as previously reported. This report fulfills the requirements under Wis. Stat. § 11.0103(3)(d).					
Authorized Representative		1			
D1. Printed Name D	2. Signature	11/1		D3. Date	
Shawn Rolland	&m //	VVh		1/14/2023	