CAMPAIGN FINANCE REPORT
STATE OF WISCONSIN

Is this report an Amendment? **NO**

COMMITTEE IDENTIFICATION

Name of Committee	Friends of Steve Arnold
Address	2530 Targhee St
City, State, ZIP	Fitchburg, WI 53711-5491

OFFICE USE ONLY

WSEB # ID

Please check if address is different than previously reported ____

NAME OF REPORT Jan 2011 Continuing Pre-Primary 20__ Spring Fall Special

July 20__ Continuing Pre-election 20__ Spring Fall Special

SUMMARY OF RECEIPTS AND DISBURSEMENTS	**Column A This Period**	**Column B YTD**	**Audited Totals Office Use Only**	
1. RECEIPTS				
A. Contributions including Loans from Individuals	$ 500.00	$ 500.00		
B. Contributions from Committees (Transfers-In)	$ -	$ -		
C. Other Income and Commercial Loans	$ -	$ -		
TOTAL RECEIPTS (Add totals from 1A, 1B, and 1C)	$ 500.00	$ 500.00		
2. DISBURSEMENTS				
A. Gross Expenditures	$ 3.00	$ 3.00		
B. Contributions to Committees (Transfers-Out)	$ -	$ -		
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	$ 3.00	$ 3.00		
CASH SUMMARY				
Cash Balance at Beginning of Report	$ 48.58			
Total Receipts	$ 500.00			
Subtotal	$ 548.58			
Total Disbursements	$ 3.00			
CASH BALANCE AT END OF REPORT	$ 545.58			
INCURRED OBLIGATIONS (at close of period)	$ -			
LOANS (at close of period)	$ 500.00			

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
Stephen Lloyd ("Steve") Arnold		31-Dec-10
	Daytime Phone 608 278 7700	

NOTE: The information on this form is required by ss. 11.06, 11.20, Wis. Stats.

Failure to provide this information may subject you to the penalties of ss.11.60, 11.62, Wisconsin Stats.

Friends of Steve Arnold

SCHEDULE 1-A **Contributions Including Loans from Individuals**

IN-KIND	CONDUIT	DATE	LAST	FIRST	ADDRESS	CITY	ST	ZIP	OCCUPATION	EMPLOYER NAME	EMPLOYER ADDRESS	AMOUNT	YTD
		11/13/10	Arnold	Steve	2530 Targhee St	Fitchburg	WI	53711	consultant	UW-Madison	Madison, WI	$ 500.00	$ 500.00

Friends of Steve Arnold

SCHEDULE 2-A

Gross Expenditures

IN-KIND	DATE	NAME	ADDRESS	CITY	ST	ZIP	PURPOSE	AMOUNT
	08/31/10	Park Bank	P.O. Box 8969	Madison	WI	53708	Banking service charge	$ 3.00

Friends of Steve Arnold

SCHEDULE 3-B

Loans: Individual, Committee or Commercial

DATE	NAME	ADDRESS	CITY	ST	ZIP	Outstanding Balance Beg of Period	New Loans This Period	Cumulative Payments This Period	Outstanding Balance End of Period	Guarantor (if any) Name and Address
11/13/10	Steve Arnold	2530 Targhee St	Fitchburg	WI	53711	$ -	$500.00	$ -	$ 500.00	
									$ -	
									$ -	
									$ -	
									$ -	
									$ -	
									$ -	
									$ -	
									$ -	
									$ -	
									$ -	