## SCHEDULE 4

## **TERMINATION REQUEST**

Complete Committee Name		Ethic	es ID Number
	ate its registration and reporting requirer igations, and the cash balance and obliga		
Candidates may not termin	nate prior to the election in which they are	e participating.	
Non-candidate committees calendar year.	s registered with the state must pay the	\$100 filing fee if they have	over \$2,500 in total expenses for the
	, if necessary, indicate how residual co iven. Sign and date the termination requ		
If you have any transaction full finance report. (ETHC	ns since your last report (other than final of F-2)	distribution of funds, or loan	forgiveness), be sure to complete the
can be granted. All record	at be completed and all obligations with ds must be maintained until 3 years after r Wis. Stats. 11.0201(4), 11.0301(4), 11.0	the date of an election in wh	nich the registrant participates, even if
DISPOSAL OF RESIDUAL		UF 2 A AND/OD 2 D	
Date Date	LD ALSO BE INCLUDED ON SCHEDU Recipient	LE 2-A AND/OR 2-B.	Amount
LOAN OR DEBT FORGIVE			
I hereby forgive all personal i	loans or have assumed responsibility for Endorser, Guarantor,		aign committee.  Amount
	idate committee registered with the state ear. I have paid the \$100 filing fee.	and the committee made over	r \$2,500 in disbursements in
☐ I do not owe the \$	100 filing fee.		
Signature of Candidate or Treasurer		 	

if

TERMINATION REQUEST. I hereby request that the committee registration be terminated. I declare that the committee has not incurred any obligations and does not anticipate incurring any. The committee does not anticipate receiving any further contributions or making any disbursements. I further state that the cash balance has been reduced to zero and that all remaining funds have been disposed of in the manner prescribed by law.

NOTE: The information on this form is required by s. 11.0105, Wis. Stats. Failure to provide the information may subject you to the penalties of ss.11.1400, 11.1401, Wis. Stats.