



NOTICE OF CAMPAIGN FINANCE VIOLATION, ERROR, OR DISCREPANCY

STATE OF WISCONSIN

Note: Use of this form is required by the Ethics Commission for any referral of a campaign finance violation by a filing officer pursuant to Wis. STAT. § 11.0102(3)(e). Completion of this form is mandatory. It is not the Commission’s intention to use any personally identifiable information from this form for any other purpose.

Before completing and submitting this form to the Ethics Commission, follow the steps below:

Review the Settlement Schedule

Review the Campaign Finance Settlement Offer Schedule posted at <https://ethics.wi.gov/SettlementSchedules>. If the violation, error, or discrepancy matches one of the categories listed, determine whether it would result in a penalty under the criteria given for that category. If the issue is not included on the settlement schedule, contact Ethics Commission staff for guidance.

Notify the Committee of the Violation

For some issues, committees have up to 30 days to fix the reporting error before being penalized. If the committee has been notified and has not addressed the violation in a timely manner, refer the issue to the Ethics Commission.

Gather Materials

Attach the committee’s registration statement and any additional documents as necessary to provide evidence of the violation.

Once complete, submit this form to the Ethics Commission via email at CampaignFinance@wi.gov.

SECTION A: FILING OFFICER CONTACT INFORMATION

A1. Filing Officer Name		A2. Title		A3. Phone	
A4. Email	A5. District Name		A6. District Type <input type="checkbox"/> County <input type="checkbox"/> City <input type="checkbox"/> Village <input type="checkbox"/> Town <input type="checkbox"/> School District		
A7. Mailing Address		A8. City		A9. State	A10. Zip

SECTION B: COMMITTEE INFORMATION

B1. Committee Name		B2. Email		B3. Phone	
B4. Mailing Address		B5. City		B6. State	B7. Zip

SECTION C: VIOLATION TYPE

<input type="checkbox"/> Late/Missing Report	Filing Period: _____	Report Due Date: _____
<input type="checkbox"/> Incomplete Contributor Information	Attach Report(s)	
<input type="checkbox"/> Cash Balance Discrepancy/Incomplete Report	Attach Report(s)	
<input type="checkbox"/> Exceeding Contribution Limits	Attach Report(s)	
<input type="checkbox"/> Prohibited Contributions	Attach Report(s)	
<input type="checkbox"/> Other: _____		