

REC 12/24/23
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CAMPAIGN FINANCE COMMITTEE/CONDUIT REGISTRATION STATEMENT

STATE OF WISCONSIN

Note: An amended registration statement must be filed within 10 days of any changes in information.

1. Is this an Amendment? No Yes If yes, please enter your committee number: _____

Committee Number

SECTION A: GENERAL INFORMATION

A1. Committee/Conduit Name COMMITTEE TO ELECT CHARLENE KLEIN		A2. Registrant Type (Choose One) <input checked="" type="radio"/> Candidate <input type="radio"/> Referendum <input type="radio"/> Recall <input type="radio"/> Conduit <input type="radio"/> Political Action (PAC) <input type="radio"/> Independent Expenditure (IEC) <input type="radio"/> Political Party <input type="radio"/> Legislative Campaign Committee			
A3. Email mayor@cityoflakegeneva.com	A4. Phone 262-215-3563				
A5. Mailing Address P.O. Box 912		A6. City LAKE GENEVA	A7. State WI	A8. Zip 53147	
Depository Institution Information					
A9. Institution Name BMO HARRIS	A10. Street Address 410 BROAD ST.	A11. City LAKE GENEVA	A12. State WI	A13. Zip 53147	
Treasurer/Administrator Information					
A14. Name SELF		A15. Email		A16. Phone	
A17. Mailing Address		A18. City		A19. State	A20. Zip
Other Officers (Optional) <i>Independent and local non-partisan candidates: Indicate by an asterisk (*) which officers are authorized to fill a vacancy in nomination due to death of candidate.</i>					
A21. Name	A22. Title	A23. Email		A24. Phone	
A25. Name	A26. Title	A27. Email		A28. Phone	
Filing Exemption <i>Registrants that will not accept contributions, make disbursements, or incur obligations in an aggregate amount of more than \$2,500 in a calendar year are eligible for exemption from filing campaign finance reports. For committees registering with the Commission, exempt status is effective only for the calendar year in which it is granted. Those committees registering with the Commission that want to remain exempt must renew each year. Local candidate committees that do not anticipate accepting or making contributions, making disbursements, or incurring obligations in an aggregate amount exceeding \$2,500 in a calendar year may claim an exemption from filing campaign finance reports at any time. This exemption applies until the local candidate committee exceeds the \$2,500 aggregate activity threshold, amends its registration, or is terminated.</i>				A29. Exemption Affirmation <input type="radio"/> Yes, this registrant is eligible for exemption. <input checked="" type="radio"/> No, this registrant is not eligible for exemption.	

SECTION B: CANDIDATE COMMITTEES

B1. Office Sought (include District/Branch) MAYOR		B2. Political Party ---	B3. Election Date 4-2-24	
Candidate Information				
B4. Name CHARLENE KLEIN	B5. Email charlene4mayor@gmail.com	B6. Phone 262-215-3563		
B7. Mailing Address P.O. Box 912	B8. City LAKE GENEVA	B9. State WI	B10. Zip 53147	
Second Candidate Committee <i>An individual who holds a state or local elective office may establish a second candidate committee to pursue another state or local office.</i>		B11. Is this your only registered candidate committee in Wisconsin? <input checked="" type="radio"/> Yes, this is my only candidate committee in Wisconsin. <input type="radio"/> No, this is my second candidate committee in Wisconsin.		
B12. Other Office Held or Sought (include District/Branch) Only complete B12 if you responded "No" to B11.				



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SECTION C: RECALL COMMITTEES

C1. Name of Official Subject to Recall	C2. Office of Official Subject to Recall	C3. <input type="radio"/> Support <input type="radio"/> Oppose
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SECTION D: PAC, IEC, AND CONDUITS

D1. Sponsoring Organization	D2. Email	D3. Phone		
D4. Mailing Address	D5. City	D6. State	D7. Zip	

SECTION E: POLITICAL PARTY & LEGISLATIVE CAMPAIGN COMMITTEES

E1. Political Party or Legislative Campaign Committee	E2. Does the Party or Committee have a Segregated Fund? <input type="radio"/> No <input checked="" type="radio"/> Yes			
Segregated Fund Depository Institution Information (if applicable)				
E3. Institution Name	E4. Street Address	E5. City	E6. State	E7. Zip

SECTION F: REFERENDA COMMITTEES

F1. Nature of Referendum (if applicable)	F2. <input type="radio"/> Support <input type="radio"/> Oppose
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SECTION G: CERTIFICATION

Accurate Information

I certify that I am an authorized representative of the registrant and that to my knowledge all of the information contained within this registration is true, correct, and complete.

Timely Amendments

I am aware of the requirement to amend this registration statement within 10 days of any change of information contained within, as well as the requirement to register within 10 days of meeting the requirements to register under Chapter 11 of Wisconsin Statutes.

Records Retention

I acknowledge the duty to maintain records in an organized and legible manner for three years from the date of the most recent election in which this registrant participates. If registering a candidate committee, I acknowledge the duty to maintain records in an organized and legible manner for the three-year period prescribed in s. 11.0201(4).

Ongoing Compliance

This registrant shall continue to maintain its registration and comply with all applicable reporting requirements under Chapter 11 of Wisconsin Statutes.

Treasurer/Administrator

G1. Printed Name	G2. Signature	G3. Date
G4. Printed Name CHARLENE KLEIN	G5. Signature Charlene Klein	G6. Date 12-29-23