

**STATE OF WISCONSIN  
ELECTIONS COMMISSION**

COMPLAINT FORM

Please provide the following information about yourself:

Name Rick Pease  
Address 1926 13th Dr Friendship WI 53934  
Telephone Number 608-547-0171  
E-mail rpease80@hotmail.com

State of Wisconsin  
Before the Elections Commission

The Complaint of Rick Pease  
\_\_\_\_\_, Complainant(s) against  
Adams-Friendship Area School District, Respondent, whose  
address is 201 W 6th St, Friendship, WI 53934

This complaint is under WI State Statute 8.21 WI Adm Code EL 8.02 (2) \_\_\_\_\_ (Insert the applicable sections of law in chs. 5 to 10 and 12 and other laws relating to elections and election campaigns, other than laws relating to campaign financing)

I, Rick Pease, allege that:

as an incumbent of 27 years the election had never changed.

So this year when I came to the Adams-Friendship District Office December 27th, 2022

just like I had done in previous years and 9 elections I was under the assumptions the rules had not changed.

I filed my declaration of candidacy and filled out my  
campaign finance registration statement and left believing the proper forms were done.

The clerk and the admin secretary never informed me that the paperwork was incorrect.

So I am asking for relief to be placed back on the ballot due to these errors.



(Set forth in detail the facts that establish probable cause to believe that a violation has occurred. Be as specific as possible as it relates to dates, times, and individuals involved. Also provide the names of individuals who may have information related to the complaint. Use as many separate pages as needed and attach copies of any supporting documentation.)

Date: 01/26/2023

Complainant's Signature

I, Rick Pease, being first duly sworn, on oath, state that I personally read the above complaint, and that the above allegations are true based on my personal knowledge and, as to those stated on information and belief, I believe them to be true.

Complainant's Signature

STATE OF WISCONSIN

County of Adams,  
(county of notarization)

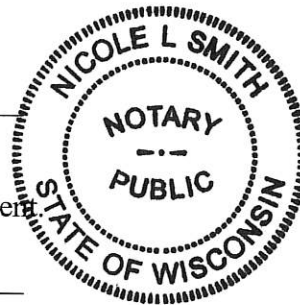
Sworn to before me this 26<sup>th</sup> day of

January, 20 23.

(Signature of person authorized to administer oaths)

My commission expires 4/21/26, or is permanent

Notary Public or \_\_\_\_\_  
(official title if not notary)

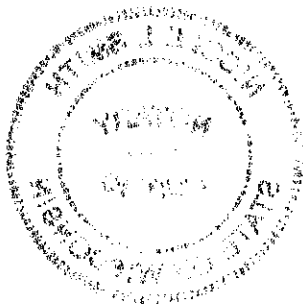


**Please send this completed form to:**

Mail: Wisconsin Elections Commission  
P.O. Box 7984  
Madison, WI 53707-7984

Fax: (608) 267-0500

Email: [elections@wi.gov](mailto:elections@wi.gov)



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CAMPAIGN FINANCE REGISTRATION STATEMENT —  
 LOCAL CANDIDATE COMMITTEE  
 STATE OF WISCONSIN

1. Is this an Amendment?  No  Yes

SECTION A: GENERAL INFORMATION

A1. Committee Name (Required for all Candidates - must be included in disclaimer on all communications)  
 Rick Pease

A2. Email  
 rpease80@hotmail.com

A3. Phone  
 608 547-0171

A4. Mailing Address  
 1926 13th dr

A5. City  
 Friendship

A6. State  
 WI

A7. Zip  
 53934

Depository Institution Information

A8. Institution Name  
 Bank One Community

A9. Street Address  
 Bank 501 Main St

A10. City  
 Adams

A11. State  
 WI

A12. Zip  
 53934

Treasurer/Administrator Information

A13. Name

A14. Email

A15. Phone

A16. Mailing Address

A17. City

A18. State

A19. Zip

Other Officers (Optional)

A20. Name

A21. Title

A22. Email

A23. Phone

A24. Name

A25. Title

A26. Email

A27. Phone

Filing Exemption

Registrants which 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. This exemption applies until the registrant exceeds the \$2,500 aggregate activity threshold, amends its registration, or is terminated.

A28. Exemption Affirmation

Yes, this registrant is eligible for exemption.  
 No, this registrant is not eligible for exemption.

SECTION B: CANDIDATE INFORMATION

B1. Office Sought (include District/Branch)  
 School Board Candidate

B2. Political Party  
 N/A

B3. Election Date  
 4/4/23

Candidate Information

B4. Name  
 Rick Pease

B5. Email  
 rpease80@hotmail.com

B6. Phone  
 608 547-0171

B7. Mailing Address  
 1926 13th dr

B8. City  
 Friendship

B9. State  
 WI

B10. Zip  
 53934

Second Candidate Committee

An individual who holds a state or local elective office may establish a second candidate committee to pursue another state or local office.

B11. Is this your only registered candidate committee in Wisconsin?

Yes, this is my only candidate committee in Wisconsin.  
 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.

## SECTION C: CERTIFICATION

### Accurate Information

I certify that I am an authorized representative of the candidate committee 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, including any change to the candidate committee's eligibility for exemption from campaign finance reporting.

### Records Retention

I acknowledge the requirement to maintain the records of the candidate committee in an organized and legible manner for three years from the close of the most recent contribution limit period (June 30 following the April election, 12/31 following the November election).

### Continuing Compliance

I acknowledge that I am required to continue to comply with all applicable requirements under Chapter 11 of the Wisconsin Statutes until this registration is terminated. I understand that I am not released from any liability simply because the election date has passed.

### Treasurer

C1. Printed Name

C2. Signature

C3. Date

### Candidate

C4. Printed Name

C5. Signature

C6. Date

Rick Pease



4/26/23

### Form Instructions

Candidates must complete all sections A, B, and C.

**Item 1. Is this an amendment?** Have you registered with this local clerk to run for office in a prior election?

**Item A1: Committee Name.** All candidates are required to register a committee. It is not required that the name include the candidate's name, but it is recommended. This committee name is required to be part of the disclaimer on all communications with express advocacy: 'Paid for by ...'

**A28: Exemption.** Candidates claiming exemption may not have more than \$2,500 of activity, in the aggregate per year. In a calendar year, if you raise \$1,600 and spend \$1,000 you have \$2,600 of aggregate activity and are not eligible to claim exemption.

**Depository Institution Information.** All candidates must designate a depository institution. While it is recommended that all candidates have a designated campaign depository account, candidates who will serve as their own treasurer may designate a single personal account to serve as the committee depository account while claiming a filing exemption and may intermingle personal and campaign funds (Wis. STAT. § 11.0201(2)(b)).

**Treasurer Information.** Each committee must appoint a treasurer. Any adult may serve as a treasurer. A candidate may serve as his or her own treasurer. If a candidate is serving as their own treasurer, please indicate 'Self' or 'Candidate', you do not need to list your complete name, address and contact information here, that will be listed in section B.

### Section B: Candidate Information

**B1.** Be sure to include the name of the county, municipality, or school district. There are 72 counties with county supervisors, 100's of school boards, and 1000's of municipal boards.

**B2.** Party - NA or None for nonpartisan offices (April); Democrat, Republican, Constitution, Green, Independent, or other ballot status party for partisan (fall) primary/election.

**Section C: Certification.** All candidates must complete section C. If the candidate is serving as their own treasurer, they would only need to sign once, as either the candidate or treasurer.