CAMPAIGN FINANCIAL REPORT

To: <u>Lisa Titensor</u> , C	linton City Recorder		
For: Lane Full No.	Mitchell Adams		
2299N 7	30 W Street Address	Clinton City City	UT 84015 State Zip
Name of Office:	MAYOR (Mayor or City Council)		
(If total contributions an contributions and expen	(Mayor of Chy Council) nd/or total expenditures are less than \$5 ditures and record them in items 1 & 3.,	00, record those totals in items 2)	2 & 3. Otherwise, itemize your
1. Total contribution	ons greater than \$500.00 (Total from For	m A) \$	Ø
2. Aggregate total	of contributions of \$500.00 or less	\$	
3. Total campaign	expenses (Total from Form B)	\$	7
4. Balance at the en	nd of the reporting period	\$_ <i>\tau_\tau\tau\tau\tau\tau\tau\tau\tau\tau\tau</i>	5
I do solemnly swear that contributions and expendent	the information contained herein is truditures for this reporting period. Candidate Signature ITEMIZED CONTRIBUTION	NO MOV G Date Sig	29,2021
· ·			
Date Received	Name of Contributor	Mailing Address & Zip Code (Optional)	Amount of Contribution
Date Received	Name of Contributor		
Date Received	Name of Contributor		
Date Received	Name of Contributor		
	ITEMIZED EXPENDITURE	(Optional)	
Date Received Date of Expenditure		(Optional)	Amount of
Date of	ITEMIZED EXPENDITUE	(Optional) RE REPORT (FORM "B")	Amount of
Date of	ITEMIZED EXPENDITUE	(Optional) RE REPORT (FORM "B")	Amount of
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Date of	ITEMIZED EXPENDITUE	(Optional) RE REPORT (FORM "B")	Amount of

(If additional space is needed, use blank paper and list information in the above format and file with this report)