CAMPAIGN FINANCIAL REPORT

To: Lisa Titensor, Cl	inton City Recorder				
For: Meeting W	me of Candidate	_			
1338N.	/800 (). Street Address	Clinton City City	UT State	84015_ Zip	
Name of Office:	Mayor or City Council)				
	d/or total expenditures are less than \$5 litures and record them in items 1 & 3.,		ıs 2 & 3. (Otherwise, item	ize your
1. Total contribution	ns greater than \$500.00 (Total from For	m A) \$	0	-	
2. Aggregate total of contributions if total is \$500.00 or less		s \$	0	-	
3. Total campaign expenses (Total from Form B)		\$	0	-	
4. Balance at the end of the reporting period		\$	0	-	
	the information contained herein is tru litures for this reporting period.	e and accurate and reflects a	complete	record of my co	ampaign
7	Candidate Signature	Date	Signed		
	ITEMIZED CONTRIBUTION	ON REPORT (Form "A"))		
Date Received	Name of Contributor	Mailing Address & Zip Co (Optional)	ode	Amount o Contributi	
Date Received	Name of Contributor		ode 		
Date Received	Name of Contributor		ode		
Date Received	Name of Contributor		ode		
Date Received	Name of Contributor		ode		
Date Received	Name of Contributor ITEMIZED EXPENDITUE	(Optional)			
Date Received Date of Expenditure		(Optional)	')		ion
Date of	ITEMIZED EXPENDITURE Person or Organization	(Optional) RE REPORT (FORM "B' Mailing Address & Zip	')	Amount of	ion
Date of	ITEMIZED EXPENDITURE Person or Organization	(Optional) RE REPORT (FORM "B' Mailing Address & Zip	')	Amount of	ion
Date of	ITEMIZED EXPENDITURE Person or Organization	(Optional) RE REPORT (FORM "B' Mailing Address & Zip	')	Amount of	ion
Date of	ITEMIZED EXPENDITURE Person or Organization	(Optional) RE REPORT (FORM "B' Mailing Address & Zip	')	Amount of	ion
Date of	ITEMIZED EXPENDITURE Person or Organization	(Optional) RE REPORT (FORM "B' Mailing Address & Zip	')	Amount of	ion

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