



Report of Contributions and Expenditures For Legislative Candidates and Officeholders

(Utah Code Section 20A-11)

Name of Candidate or Officeholder		Political Party	
Street Address and Apartment Number	City	State	Zip Code
Office Seeking	District Number	Area Code & Phone Number	Area Code & Fax Number

LEGISLATIVE CANDIDATES

Type of Report

(Check the appropriate box)

INTERIM REPORTS:

- Seven days preceding Party Convention
(Required by all candidates)
- Seven days preceding Primary Election
(Required by all candidates)
- August 31
(Required by all candidates)
- Seven days before a General Election
(Required by all candidates)

YEAR-END REPORT:

- January 10 of every year

FINAL REPORT:

- Final Report (Required by all candidates and officeholders as soon as the close campaign accounts)

- Yes
- No

Is this report an amendment?

Report Verification

I, _____
Print Name of Candidate or Officeholder

affirm that this Report of Contributions and Expenditures
is true, accurate and correct to the best of my knowledge.

Signature of Candidate or Officeholder Date

To File this Form

Mail or deliver to
Lieutenant Governor's Office
Utah State Capitol, Suite 220
Salt Lake City, UT 84114-2325
Fax (801) 538-1133

For More Information

Contact the Lieutenant Governor's Office
(801) 538-1041
1-800-995-VOTE (8683)
elections@utah.gov

3/08


For Office Use Only

- Entered _____
- Copied _____

Date Received

Summary Page

(Complete this page after filling out Schedule A and Schedule B)

		Column A Total this Period	Column B Year-to-Date Total
CONTRIBUTIONS RECEIVED			
1	TOTAL CONTRIBUTIONS RECEIVED (See Schedule A)		
EXPENDITURES MADE			
2	TOTAL EXPENDITURES MADE (See Schedule B)		
BALANCE SUMMARY			
3	Balance at Beginning of Reporting Period		 Refer to Line 7 on your last report
4	Total Contributions Received (From Line 1 Column A)		
5	Subtotal (Add Lines 3 and 4)		
6	Total Expenditures Made (From Line 2 Column A)		
7	Balance at Close of Reporting Period (Subtract Line 6 from Line 5)		

Schedule A

Itemized Contributions Received

Attach additional pages if needed

Date Received	Name of Contributor	Complete Mailing Address	Amount of Contribution
SUBTOTAL FOR THIS PAGE			
TOTAL CONTRIBUTIONS RECEIVED (Sum of subtotals from all Schedule A pages)			

