Candidate Statement of Non-Receipt of Contributions and Non-Expenditure of Funds

For candidates that have not spent or received **any** campaign funds

Name of Candidate or Officeholder		Political Party	
David L Forsgren		—	
Street Address and Apartment Number	**City**	**State**	**Zip Code**
5990 North Hwy 38	Honeyville	Utah	84304
Office Seeking	**District Number**	**Area Code & Phone Number**	**Area Code & Fax Number**
Mayor	Honeyville	435-279-4485	

No Contributions & Expenditures

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

Report Verification

I, David Forsgren
Print Name of Candidate or Officeholder

affirm that I have **received no contributions and incurred no expenditures** for political purposes during this reporting period.

D Forsgren
Signature of Candidate or Officeholder

Oct 20-09
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

Please contact our office at
(801) 538-1041
1-800-995-VOTE (8683)
elections@utah.gov

03/08

For Office Use Only

- ☐ Entered _____
- ☐ Copied _____

Date Received