



WEST POINT CITY
3200 WEST 300 NORTH
WEST POINT CITY, UT 84015

2023 MUNICIPAL CAMPAIGN FINANCE STATEMENT
REPORT # 2 -GENERAL ELECTION

Report to Include Transactions Between August 25, 2023 - October 19, 2023

DUE BEFORE OCTOBER 24, 2023 @ 5:00 PM

To: CASEY ARNOLD
WEST POINT CITY RECORDER
CARNOLD@WESTPOINTCITY.ORG
3200 West 300 North
West Point City, UT 84015

CANDIDATE NAME: Kelly Royce Ross
Full name of candidate

STREET ADDRESS: 448 N. 2900 W CITY/STATE/ZIP: West Point City 84015

PHONE NO: 801-529-3352 EMAIL: kerosse.dsdmail.com

CANDIDATE FOR OFFICE OF: City Council

	TOTALS FROM LAST REPORT	+	TOTALS FROM THIS REPORT	=	CUMULATIVE REPORT
1. Total contributions of donors who gave more than \$50.00 (from Form "A" on page 2)	\$ <u>608.97</u>		\$ <u>∅</u>		\$ <u>608.97</u>
2. Aggregate total of contributions of \$50.00 or less	\$ <u>∅</u>		\$ <u>∅</u>		\$ <u>∅</u>
3. Total campaign expenses (from Form "B" on page 3)	\$ <u>608.97</u>		\$ <u>∅</u>		\$ <u>608.97</u>
4. Balance at the end of this reporting period	\$ <u>∅</u>		\$ <u>∅</u>		\$ <u>∅</u>

I do hereby certify that, to the best of my knowledge, all receipts and expenditures have been reported for the period beginning August 25, 2023 and ending October 19, 2023
And that there are no bills or obligations outstanding and unpaid except as set forth in this report.

Date: October 24, 2023 Signed [Signature]
(Candidate Signature)

DATE & TIME RECEIVED: <u>10/24/2023 @ 3:33 PM</u>	RECEIVED BY: <u>Casey Arnold</u>
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NOTE: Utah Election Code 10-3-208 states that all municipalities shall adopt an ordinance establishing campaign finance disclosure requirements for candidates running for city or town office. You should check with your city recorder or town clerk for the disclosure requirements which pertain to your municipality.

FORM "A" -- ITEMIZED CONTRIBUTION REPORT

Date Received	Name of Contributor	Mailing Address & Zip Code	Amount of Contributions
			0

If additional space is needed, use another paper and list information in the same format as above and attach to this report.

FORM B - ITEMIZED EXPENDITURE REPORT

Date Of Expenditure	Person or Organization To Whom Expenditure Was Made	Mailing Address & Zip Code	Amount of Expenditure
			0

If additional space is needed, use another paper and list information in the same format as above and attach to this report.