

FINANCIAL CAMPAIGN REPORT

(Utah Code Section 17-16-6.5)

| | | | |
|---|---|--------------------------------------|--------------------------|
| Name of Candidate <i>Kami Dearden</i> | | | |
| Street Address and Apartment Number <i>385 N 100 E</i> | City <i>Fillmore</i> | State <i>UT</i> | Zip Code <i>84631</i> |
| Office <i>City Council</i> | Area Code & Phone Number <i>435-253-0082</i> | Area Code & Fax Number <i>N/A</i> | |

Type of Report
(Check the appropriate box)

REPORTS:

30 days after Primary Election: September 15, 2017
(Required by all candidates **eliminated** in the primary)
(Guilty of an infraction if not submitted)

Seven days before a General Election: October 31, 2017
(Required by all candidates)
(Name may be removed from the ballot if not submitted)

30 days after a General Election: December 7, 2017
(Required by all candidates)
(Guilty of an infraction if not submitted)

Yes
 No

Is this report an amendment?

Report Verification

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

Kami Dearden

Signature of Candidate or Officeholder

11-30-17


Date

SUMMARY

| | | |
|---------------------------------|----|---------------|
| 1. Balance from Last Report | \$ | <u>429.81</u> |
| 2. Total Contributions Received | \$ | <u>0</u> |
| 3. Total Campaign Expenses | \$ | <u>0</u> |
| 4. Current Balance | \$ | <u>429.81</u> |

Itemized Contributions Received

Attach additional pages if needed

| Date Received | Name of Contributor | Complete Mailing Address | Amount of Contribution |
|--|---------------------|--------------------------|---|
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| SUBTOTAL FOR THIS PAGE | | | |
| TOTAL CONTRIBUTIONS RECEIVED (Sum of all Contributions) | | |  |

Itemized Expenditures Made

Attach additional pages if needed

| Date of Expenditure | Name of Recipient | Purpose | Amount of Expenditure |
|---|--------------------------|----------------|------------------------------|
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| SUBTOTAL FOR THIS PAGE | | | |
| TOTAL EXPENDITURES MADE (Sum of Expenditures) | | | 0 |