

RECEIVED AUG 07 2017 BLUFFDALE CITY

City of Bluffdale Municipal Elections Campaign Finance Statement Report of Contributions and Expenditures (Utah Code Section 10-3-208)

| | | | | (Utan Code S | section 10 | -3-208) |) | | |
|----------------------------|--|------------|---|--|-------------|---|---|-------------------|--|
| C.c. Name o | ourt of Candida | ney | Hanser | ٦ | CE Email | H 2 Address | 7@16tmail.com | | |
| <u>918</u> Street A | B W. Address | Free | dom Bin | t way | Bluff | tale | State | 84065 Zip Code | |
| Office | Seeking | | | | | | 801-850-7996 | | |
| 🗌 Ма | ivor 🗵 c | Council Me | mber (2-vr) 🗌 Co | uncil Member (4-vr) |) | | Area Code & P | 'hone Number | |
| | | | | | | | | | |
| | | , e | | Typ (Check | e of Ro | eport | | | |
| | REPORT – Primary | | | | | REPORT – Not Eliminated at Primary | | | |
| C | NEW - No later than se Municipal Primary Elect August 8, 2017 | | | n seven days before the date of the Election – (HB283, 2016) | | | No later than seven days before the date of a Municipal General Election – October 31, 2017 | | |
| A N | | | Eliminated at Prim No later than 30 d the Municipal Prim September 1 | ays after the date on ary Election | of | | No later than 30 days after the dat Municipal General Election – December 7, 2017 | e of the | |
| D D A T E S | Report Verification I. <u>Carrhey Hansen</u> Print Name of Candidate affirm that this Report of Contributions and Expenditures is true, accurate and correct to the best of my knowledge. <u>County Hans</u> Signature of Candidate <u>Signature of Candidate</u> <u>BIO17</u> Date | | | | | | | | |
| | | | <u>To File this F</u> Mail or delive | er to: | | | For Office Use Only | Mannes | |

Date Received _ Time Received _ Received by ____

: 25 a.m.

A

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Bluffdale City Recorder 2222 West 14400 South Bluffdale, UT 84065-5248 wdeppe@bluffdale.com For More Information

wdeppe(@bluffdale.com For More Information Contact the Recorder's Office (801) 254-2200 Fax (801) 253-3270

Schedule B Itemized Expenditures

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| Amount of Expenditure Exceeding \$50.00 | Name of Recipient | 2 |
|---|------------------------|------|
| Ø | NA | |
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| | SUBTOTAL FOR THIS PAGE | \$ 8 |
| | TOTAL EXPENDITURES | \$ Ø |

Attach additional pages if needed

Summary Page

Column A Column B Column C Column D Column E Total thru Total thru Total thru Total thru Campaign August 8 Sept. 14 October 31 December 7 Total **Balance** at Beginning of Reporting \$ B \$ \$ \$ \$ Period: + **CONTRIBUTIONS RECEIVED** TOTAL CONTRIBUTIONS - (Schedule X \$ \$ \$ \$ \$ A): + AGGREGATE TOTAL Aggregate total of all contributions \$ Ø \$ \$ \$ \$ that individually do not exceed \$50: TOTAL CONTRIBUTIONS \$ \$ Comments Comments \$ \$ Ø \$ -**EXPENDITURES MADE** TOTAL EXPENDITURES - (Schedule Ø \$ \$ \$ \$ \$ B): **BALANCE SUMMARY** Balance at Close of Reporting \$ Ø \$ \$ \$ \$ Period:

(Complete this page after filling out Schedules A, B & C)

Attach Schedule C

Report the total amount of all campaign contributions and expenditures if you received \$500 or less in campaign contributions and spent \$500 or less on your campaign.

| Total Campaign Contributions \$500 or less: | \$ Ø |
|---|---------|
| Total Campaign Expenditures \$500 or less: | \$ ø |

In the event a candidate has no contributions or expenditures during a reporting period, a financial statement which states there were no contributions received or expenditures made <u>must still be filed</u>.

Schedule C In-Kind and Other Nonmonetary Contributions Received

| Name of Donor <i>(must be provided)</i> | Contribution | \$ Amou Contrib | nt of ution |
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| тот | AL IN KIND CONTRIBUTIONS | \$ | 6 |

Attach additional pages if needed