Candidate Statement of Non-Receipt of Contributions and Non-Expenditure of Funds
For city candidates that have not spent or received any campaign funds

Nam	la thou Mit Mell	Political Party	,	
2	et Address and Apartment Number 99 South 200 West	City Wales Area Code & Phone Number	State UT Area C	Zip Code 8466 / ode & Fax Number
& Expenditures	Type	of Report e of Report ne appropriate box) Yes I sthis primar 9 Sep 2021 e primary (September 12, 2019) 21 019)	report an amendment?	
No Contributions	affirm that I have <u>received no contri</u>	during this reporting peri	no expenditure od. 1(^9-2	<u>s</u>
	To File this Form Mail or deliver to Wales Yourn Clerk HC 13 Pox 4274 Wales UT 84667 For More Information Please contact our office at 435.436.9345	For C	Office Use Only	

Date Received

Candidate Statement of Non-Receipt of Contributions and Non-Expenditure of Funds For city candidates that have not spent or received any campaign funds

Namaas	Candidate or Officeholder		-		
Name of C	_	Political	Party		
150	mon Garsf				
	dress and Apartment Number	City		State	Zip Code
	75 State Street	wales		UT	84667
Office See		Area Code & Phone Number		Area C	ode & Fax Number
100v	· Courle 2 your	901-244-13	03	q	
s & Expenditures	(COUNTERIM REPORTS: Seven days before Primary Election. (August 5 (Required by each candidate who will participat	9 Ser 202 after the primary (September 12, 25 et 2021 r29, 2019)	Is this repo	ort an amendment?	
	I. Ronow Print Name affirm that I have received no co	e of Candidate or Officeholder ontributions and incur ses during this reporting	period.	expenditure - G - a (<u>5</u>
	To File this Form Mail or deliver to Wales Youn Clerk HC 13 Rox 4274 Wales UT 84667 For More Information Please contact our office at 435.436.9345	Entered Copied	·	ce Use Only	

Candidate Statement of Non-Receipt of Contributions and Non-Expenditure of Funds For city candidates that have not spent or received any campaign funds

Name	of Candidate or Officeholder	Political Party See Out	ne
1	Address and Apartment Number 73 W 300 Y Seeking District Numb	City WHAES Her Area Code & Phone Number	State Zip Code 44 Area Code & Fax Number
CI	MAJIMAN	433 3630731	135
is & Expenditures	Seven days before a General Election (Required by all candidates)	No Il participate in the primar PSP 2021 hirty days after the primary (Suptember 12, 2019). 24 Oct 2021 n. (October 20, 2019) L Dec 2021	report an amendment?
No Contributions	affirm that I have receive for political	Report Verification Print Name of Candidate or Officeholder d no contributions and incurred reporting period purposes during this reporting period at the or Officeholder	no expenditures od. Date
	To File this Form Mail or deliver to Wales Yourn Clerk HC 13 Box 4274 Wales UT 84667 For More Information Please contact our office at 435.436.9345	For O	Office Use Only 11.9.2021 Date Received

Report of Contributions and Expenditures For Wales City Candidates

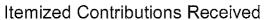
	(Otan Code s	59Ction 10-3-2081		
Name of Candidate or Officeho	older	4.		
	on L	W/s		
Street Address and Aparthyont	Number	City Ves	State	Zip Code
Office Seeking	Area Code & Phone N	Number	Area	Code & Fax Number
Mayor				
1 1000				
/		of Report the appropriate box)		
REPORTS:				
Səvən days (Rəqiulpəd by	20 معنان على 3 معنان من 5 معنان كون كون كون كون كون كون كون كون كون كو	2 2) ne primary)		
☐ For those eli	minated in the primary, thirty days after the	9 Sep 20 he primary (September 12	. 2 (). 2019)	
	before a General Election, (Ostober 29: 1)			
, , ,				
30 days after (Raquired by	2 Dec 2021 er a General Election, (December 5, 2319 v all candidates)	D Y		n amendment?
	nce statement is considered filed if it is re recorder's office by 5 p.m. on the day it is			
FOCKER STATES	Report	Verification	, <u>, , , , , , , , , , , , , , , , , , </u>	
acc red Secrete Secrete Secrete Secrete				
	I, Print Name of C	Candidate or Officeholder		
Kinaktus Persenal P	affirm that this Report of	Contributions and	Evpandituras	
**	is trug accurate and coγr			
	July on J. So	Relea	11-5-	1/
	Signature of Candidate o	r Officenolder	Date	7
	<u> </u>			
To File	e this Form		For Office	Lise Only
Wales Trans	er original copy to 1. City Recorder/Clerk			Use omy
/c /3 B	1 Un Redorder: Clerk	☐ Enter☐ Copie		
Wales				
1	Information			
Plea. 	se contact: 4 34. 9345			11.7.2021
				Dari Ora word

Page	of		
Candidate or Officeholder's Last Name			
Date of Report	ſ		

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

		Column A Total this Period	Column B Year-to-Date Total
C	ONTRIBUTIONS RECEIVED		
1	TOTAL CONTRIBUTIONS RECEIVED (See Schedule A)		0
E	XPENDITURES MADE		
2	TOTAL EXPENDITURES MADE (See Schedule B)		0
В	ALANCE SUMMARY		
3	Balance at Beginning of Reporting Period	0	Refer to Line 7 on your last repo
4	Total Contributions Received (From Line 1 Column A)	Q	
5	Subtotal (Add Lines 3and 4)	0	
6	Total Expenditures Made (From Line 2 Column A)	0	
7	Balance at Close of Reporting Period (Subtract Line 6 from Line 5)	0	

Schedule A



Page	of			
1)			
Candidate of Officeholder's Last Name				
DAU15				
Date of Report				
11-8-21				

Attach additional pages if needed Amount of Date **Complete Mailing Address** Name of Contributor Contribution Received SUBTOTAL FOR THIS PAGE 0 TOTAL CONTRIBUTIONS RECEIVED (Sum of subtotals from all Schedule A pages)

Schedule B

Itemized Expenditures Made

Page	l of	
1	1	
Candidate or Officeholder's Last Name		
2AVIS		
Date of Report		
11-8.	- Q1	

Attach additional pag	ges if needed	•	
Date of Expenditure	Name of Recipient	Purpose	Amount of Expenditure
		- Philosophy P - No.	
SUBTOTAL FO	R THIS PAGE		
TOTAL EXPEN	0		