To: Liliana Soriano, City of Wendove					
Full Name of Candidate:	ve Carrollo)	Gomez		
Street Address: 350	Norion Au	LNU			
City: Wondover	4				
Home Phone: 801 - 635				5 -	665-7990
Name of Office:	Count		·····		
Political Party (if applicable):	,				
			e e		
	TOTALS FROM LAST REPORT	+	TOTALS FROM THIS REPORT	-	CUMULATIVE REPORT
1. Total contributions (from Form "A" on page 2)	\$	+	\$ 0	_	\$
2. Total campaign expenses (from Form "B" on page 3)	\$	+	\$ 0	=	\$ 0
3. Balance at the end of this reporting period	\$ 0	+	\$ 0	=	\$ 0
I do hereby certify that, to the best of period beginning:	my knowledge, all rece	eipts	and expenditures have	been	ı reported for the
and ending:					
and that there are no bills or obligatio	ns outstanding and un	paid	except as set forth in tl	is re	port.
Signed: ///mul Cm/	Arrillo Gow	Da	ite: 10/20	12	23
Printed name: ///anucl	Arrillo Gow	U2	and the same of th		

ITEMIZED **CONTRIBUTION** REPORT – FORM "A"

Date	Name of Contributor	Mailing Address & Zip	Amount
,			
, ,			
		· · · · · · · · · · · · · · · · · · ·	

ITEMIZED <u>EXPENDITURE</u> REPORT – FORM "B"

Date of expenditure	Person or Organization to whom expenditure was made	Purpose of Expenditure	Amount
	·		
			· · · · · · · · · · · · · · · · · · ·
· · · · · · · · · · · · · · · · · · ·			
•		·	

To: Liliana Soriano, City of Wendove	er UT					
Full Name of Candidate: Hall	m C Pal	(4FO)				
Street Address: 690 Ana	Blud.					
City: <u>Jendover</u>		34 <u>08</u>	3			
Home Phone: 801 867 00	036	Busin	ess Phone:			
Name of Office: (1)						
Political Party (if applicable):						
	TOTALS FROM LAST REPORT		TOTALS FROM THIS REPORT	=	Cĩ	JMULATIVE REPORT
1. Total contributions (from Form "A" on page 2)	\$	+ \$	0	=	\$	δ
2. Total campaign expenses (from Form "B" on page 3)	\$ O	+ \$	0	=	\$	δ
3. Balance at the end of this reporting period	\$ 0	+ \$	0	=	\$	0
I do hereby certify that, to the best of period beginning: August 2 ^a and ending: Oxfober 10 ^a and that there are no bills or obligation Signed: Adam Pa	5, 2023 1, 2023	 paid exc	_	is rej	port.	rted for the

ITEMIZED **CONTRIBUTION** REPORT - FORM "A"

Date	Name of Contributor	Mailing Address & Zip	Amount
, , , , ,			
, ,			
	A. A		
			-

ITEMIZED **EXPENDITURE** REPORT – FORM "B"

Date of expenditure	Person or Organization to whom expenditure was made	Purpose of Expenditure	Amount
	·		
	•		

To: Liliana Soriano, City of Wendov	er UT					
Full Name of Candidate: Brandon	Grossman		and the second s			
Street Address: 682 Moria	h evc.		and an interest the third that the control of			
City: wendoven	, UT 8	84_0 \$	33			
Home Phone: 385-218-13	351	Busi	ness Phone:		*********	
Name of Office: city coun	s <i>[1</i>					
Political Party (if applicable):						
	TOTALS FROM LAST REPORT	+	TOTALS FROM THIS REPORT	=	C	UMULATIVE REPORT
1. Total contributions (from Form "A" on page 2)	\$ -6	+	\$ 0	=	\$	0
2. Total campaign expenses (from Form "B" on page 3)	\$ -0-	+	\$ 0	Marie	\$	0
3. Balance at the end of this reporting period	\$ 0	+	\$ ~	=	\$	-0-
I do hereby certify that, to the best o period beginning: and ending: and that there are no bills or obligation						orted for the
Signed: B		Date	e: <u> </u>	2:	3	
Printed name: Brandon Gross	<u> </u>					

ITEMIZED **CONTRIBUTION** REPORT – FORM "A"

Date	Name of Contributor	Mailing Address & Zip	Amount
•			
	1 1 1 1		

ITEMIZED **EXPENDITURE** REPORT - FORM "B"

Date of expenditure	Person or Organization to whom expenditure was made	Purpose of Expenditure	Amount
			,
		·	
	,		
			<u>. </u>
			-

	TOTALS FROM LAST REPORT	+	TOTALS FROM THIS REPORT	=	CUMULATIVE REPORT
1. Total contributions (from Form "A" on page 2)	\$	+	\$	=	\$. 00
2. Total campaign expenses (from Form "B" on page 3)	\$	+	\$	1	\$.00
3. Balance at the end of this reporting period	\$.00	+	* • • • • • • • • • • • • • • • • • • •	=	\$.00

ITEMIZED **CONTRIBUTION** REPORT – FORM "A"

Date	Name of Contributor	Mailing Address & Zip	Amount
·			
	•		

ITEMIZED **EXPENDITURE** REPORT – FORM "B"

Date of expenditure	Person or Organization to whom expenditure was made	Purpose of Expenditure	Amount
			
		information in the above format and file w	