

MUNICIPAL CAMPAIGN FINANCIAL DISCLOSURE

PHILLIP D.	SWALLSON			
Full name of candidate				
857 E	3250 N. NORTH DOBEN UT			
	Address			
City Co	Name of office			
Name of office				
Total contributions (Form "A" total)	\$			
2. Total campaign expenses (Form "B" total)	\$			
3. Balance at the end of the rep	porting period \$			
12.5.19 Date	Millip Sur			
Date	Signature of Candidate			



ITEMIZED CONTRIBUTION REPORT (FORM "A")

Date Received	Name of Contributor	Complete Mailing Address	Amount of Contribution
	INE		
	Mola		
,			



ITEMIZED EXPENDITURE REPORT (FORM "B")

Date of Expenditure	Person/Organization to Whom Expenditure was made	Purpose of Expenditure	Amount of Expenditure
	NONE		
	ν_0		
/			
xxxxxxxxxxxx	xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx	TOTAL CAMPAIGN EXPENDITURES	\$ O.

