MUNICIPAL CAMPAIGN FINANCIAL DISCLOSURE

Debra Marigoni
Full name of Candidate

5245 S. 5100 W
Street Address

City Council
Name of Office

1. Total contributions (Form "A" total) $ 0

2. Total campaign expenses (Form "B" total) $ 0

3. Balance at the end of the reporting period $ 0

11-27-2021
Date

Debra Marigoni
Signature of Candidate

ITEMIZED CONTRIBUTION REPORT (FORM "A")

Date Received	Name of Contributor	Complete Mailing Address & ZIP Code	Amount of Contribution
		TOTAL CONTRIBUTIONS	$ 0

Total Campaign Expenses (FORM "B")

Date	Description of Expense	Amount
		TOTAL $ 0