

Schedule A

Itemized Contributions Received

Attach additional pages if needed

Date Received	Name of Contributor	Complete Mailing Address	Amount of Contribution \$50.00 +
	No contributors other than myself		
SUBTOTAL FOR THIS PAGE			
TOTAL CONTRIBUTIONS RECEIVED (Sum of subtotals from all Schedule A pages)			

Summary Page

(Complete this page after filling out the prior schedules)

		Column A Total this Period	Column B Year- to-Date Total
	CONTRIBUTIONS RECEIVED		
1	TOTAL CONTRIBUTIONS RECEIVED – (Schedule A)	0	
	EXPENDITURES MADE		
2	TOTAL EXPENDITURES MADE – (Schedule B)	1874.92	
	BALANCE SUMMARY		
3	Balance at Beginning of Reporting Period	0	
4	Add + Contributions Received	0	
5	Subtotal:	\$ 0	
6	Subtract - Expenditures Made	1874.92	
7	Balance at Close of Reporting Period	\$ 0	
	Attach Schedule C – In-Kind and other Nonmonetary Contributions Received		



HERRIMAN
CITY

Municipal Elections Campaign Finance Report

Report of Contributions and Expenditures
§10-3-208

Name of Candidate <u>Steve GABERT</u>	City <u>Herriman UT</u>	State <u>UT</u>	Zip Code <u>84096</u>
Street Address <u>5443 W. Green</u>	District Number <u>1</u>	Area Code & Phone Number <u>801-550-3002</u>	
Office Seeking <u>City Council</u>			

CANDIDATES

Type of Report (Check the appropriate box)

REPORT - Eliminated at Primary

☒ No later than 30 days after the date of the
Municipal Primary Election -
September 10, 2015

☐ Yes
☒ Is this report an amendment?
☐ No

REPORT - NOT Eliminated by Primary

No later than seven days before the date of a
Municipal Election -
October 27, 2015

No later than 30 days after the date of the
Municipal Election -
December 3, 2015

Report Verification

I, Steve GABERT
Print Name of Candidate

affirm that this Report of Contributions and Expenditures
is true, accurate and correct to the best of my knowledge.

[Signature]
Signature of Candidate
Date 8-18-15

To File this Form
Mail or deliver to:

Herriman City Recorder
13011 South Pioneer Street
Herriman, UT 84096

For More Information
Contact the City Recorder's Office at
(801) 727-0902
inosstrom@herriman.org

For Office Use Only

☐ Date Received _____
☐ Time Received _____
☐ Received by _____

Schedule B

Itemized Expenditures Made

Itemized Expenditures Made

Attach additional pages if needed

[illegible]

Schedule C

In-Kind and Other Nonmonetary Contributions Received

Attach additional pages if needed

Date Received	Name of Contributor	Contribution
7-10-15	Mike Lindsey	Website