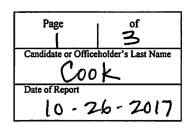
Moroni City Candidate Statement of Non-Receipt of Contributions and **Non-Expenditure of Funds**

For city candidates that have not spent or received any campaign funds

e of Candidate or Officeholder		·	Politica	l Party			
Cana deole							
t Address and Apartment Number		City		:	State	Zip C	
1/1 E 100 50		Mono	<u>uʻ</u>	<i>\bigcup_\bigcup</i>	4	848	
e Seeking District Number		le & Phone タック			Area Code	e & Fax Nun	
y Council	726-	436	<i>'85</i>	<i>50</i>			
	Type of R	eport	-		, , ,,,,,,,,,		
INTERIM REPORTS:	(Citeck tile appro		Yes				
Seven days before Primary Election, (Au (Required by each candidate who will pa	ugust 8, 2017) rticipate in the primar		No	Is this report an amendment?			
For those eliminated in the primary, thirty days after the primary (September 14, 2017).							
 X Seven days before a General Election, ((Required by all candidates) 							
30 days after a General Election, (Decer (Required by all candidates)	D oo days and a Concrat Licotion, (December 1, 2011)						
	Report Verif	icatio	^		4		
I,	I,						
	affirm that I have <u>received no contributions and incurred no expenditures</u> for political purposes during this reporting period.						
Signature of Candidate or Officeholder 10-26-/ Date							
To File this Form Mail or deliver original copy to]	For Office U	Jse Only		
Carol Haskins, Moroni City Recorder/Cler 80 South 200 West PO BOX 870	rk		Entered Copied				
Moroni UT 84646-0870					26 Oct	2017	
For More Information Please contact:				'	(•	
Please contact: Carol Haskins, Moroni City Recorder/Cles 435-436-8359	rk						

Date Received



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

		Column A Total this Period	Column B Year-to-Date Total	
С	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		Refer to Line 7 on	your last repo
4	Total Contributions Received (From Line 1 Column A)			
5	Subtotal (Add Lines 3and 4)			
6	Total Expenditures Made (From Line 2 Column A)			
7	Balance at Close of Reporting Period (Subtract Line 6 from Line 5)			

Schedule A

2 3 Candidate or Officeholder's Last Name Atkinson

Page

10-26-2017

Itemized Contributions Received

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

Schedule B

Itemized Expenditures Made

Page	of 3				
Candidate or Officeholder's Last Name					
Atkinson					
Date of Report					
10 - 26	2017				

Attach additional pages if needed Date of Amount of Name of Recipient **Purpose Expenditure Expenditure** SUBTOTAL FOR THIS PAGE TOTAL EXPENDITUTRES MADE (Sum of subtotals from all Schedule B pages)