Carol Haskins, Moroni City Recorder/Clerk 435-436-8359

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

Name of Candidate or Officeholder				Political	l Party			
1	enter lamb							
	Address and Apartment Number	С	ty			State		Zip Code
-	245 E 600 S	More	ند			4	. 8	4641
Office S		Area Code	& Phone	Numbe	r	А	rea Code &	Fax Numbe
Ci	ounell	435-	43	- ح	9716			
ဖွ		Type of Re (Check the appropria						
ש	INTERIM REPORTS:			Yes				
Expenditures	X Seven days before Primary Election, (Aug	uet 8 2017)	П	No	Is this report	an amendn	nent?	
5	(Required by each candidate who will parti	cipate in the primar						
	For those eliminated in the primary, thirty d	lays after the primary (\$	Septemb	er 14, 2	017).			
be	Seven days before a General Election, (October 31, 2017)							
X	(Required by all candidates)							
	30 days after a General Election, (December 7, 2017)							
න	(Required by all candidates)							
ອ ທີ່								
Suomunantions	Report Verification							
1								
<u> </u>	Print Name of Candidate or Officeholder							
	affirm that I have received no contributions and incurred no expenditures							
ō	for political purposes during this reporting period.				ı			
ر								
0 Z	Signature of Candidate or Officeholder Date			`				
Z .								
	To File this Form]	For Office	e Use C	nly	
	Mail or deliver original copy to		_				•	
	Carol Haskins, Moroni City Recorder/Clerk 80 South 200 West			Entered Copied				
	PO BOX 870							
	Moroni UT 84646-0870							
	For More Information					26	OCT	2017
	Please contact:							

Date Received

Page	3 °		
Candidate or Officeholder's Last Name			
Lamb			
Date of Report			
10-26	0-2017		

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)		عـ	
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

Itemized Contributions Received

Page	of		
2	ろ		
Candidate or Officeholder's Last Name			
Lamb			
Date of Report			
10-24	2017		

Date Received	Name of Contributor	Complete Mailing Address	Amount of Contribution
		-	
SUBTOTAL	FOR THIS PAGE		
	ITRIBUTIONS RECEIVED (Su	um of subtotals from all Schedule A pages)	0

Schedule B

Itemized Expenditures Made

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

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