

#### **Salt Lake County Clerk**

2001 South State Street, Suite #S1100 Salt Lake City, Utah 84114-4575 Phone# 385-468-8683 Fax# 385-468-7401

## 2018 Financial Disclosure Report For a Candidate

Connie Burgess Gran	ite Board of	Education	Political Party	
Street Address and Anartment Number	City	State	7in Code	
Office Sought District Number  Granite BOFE 3	Phone Number	Fav #	Fmail Address	
	oe of Report k the appropriate box)			
INTERIM REPORTS: (Required only during election years)	YEAR-END REPO ☑ January 31 of ear open campaign cor	ch year (Required by	all	
☐ April 5	FINAL / DISSOLU	JTION REPORT:		
☐ Seven days before a primary election	longer active or	on Report – The camp receiving contribution unt balance is zero.	-	
<ul><li>☐ September 15</li><li>☐ Seven days before a general election</li></ul>	ls this report an ame ☐ Yes (If yes, date			
26	□ No			
Report Verification  I, Connie Burges  Print Name of Candidate of Officeholder  affirm that this Financial Disclosure Report				
is true, accurate and co	prect to the best of my			
For more information or additional forms, vis	the second secon	e Only D	ate Received	

Copied

County Clerk, Elections Division at

385-468-8683

SALT LAKE COUNTY CLERK

RECEIVED IN OFFICE

TAM 2 9 2019

Page	of
Candidate or Office	holder's Last Name
Date of Report	

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

		Column A Total this Period	Column B Aggregate Total	
C	ONTRIBUTIONS RECEIVED			
1	TOTAL CONTRIBUTIONS RECEIVED  (See Schedule A)  3701. 3		3701.39	
E	XPENDITURES MADE		×	
2	TOTAL EXPENDITURES MADE (See Schedule B)	0	3704.39	
В	ALANCE SUMMARY			
3	Balance at Beginning of Reporting Period	Ø.	Refer to Line 7 on	your last re
4	Total Contributions Received (From Line 1 Column A)	0		
5	Subtotal (Add Lines 3and 4)	0		
6	Total Expenditures Made (From Line 2 Column A)	0		
7	Balance at Close of Reporting Period (Subtract Line 6 from Line 5)	0		

Sc	h	e	d	u	le	A
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Itemized Contributions Received

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Candidate or O	Officeholder's Last Name
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•	

Date Received	Name of Contributor	Complete Mailing Address	Occupation/Employer	Amount \$
	none			
11				
				<u> </u>
		*		
SUBTOTA	L FOR THIS PAGE			
TOTAL CO	NTRIBUTIONS RECEIVE	D (Sum of subtotals from all Sche	dule A pages)	

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Candidate or Offic	eholder's Last Name
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### **Schedule B**

### Itemized Expenditures Made

ttach additional pag Date of Expenditure	Name of Recipient	Purpose	Amount of Expenditure
	None		
SUBTOTAL FO	R THIS PAGE		