

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

2017 Financial Disclosure Report For a Candidate

Name of Candidate or Officeholder	Office		Political Party
Scott Miller	A/M		7
Street Address and Apartment Number	City	State	Zip Code
Office Sought District Number	Phone Number	Fax#	Email Address
Recorder 5a			
	Type of Report (Check the appropriate box)		
INTERIM REPORTS: (Required only	YEAR-END REI		
during election years)	☐ January 31 of e	each year (Required I committees)	by all
☐ April 5		LUTION REPORT:	
☐ Seven days before a primary election	Final / Dissolu	ition Report – The ca	
☐ September 15	•	or receiving contributi ount balance is zero.	ions and the
	Is this report an an		
☐ Seven days before a general election		ate of report)	
	No No		
Scott	eport Verification Miller e of Candidate or Officel	nolder	
is true/accurate an	his Financial Disclosure ad correct to the best of n and the best of n and the best of n and the best of n	ny knowledge.	il de la companya de
For more information or additional forms www.clerk.slco.org or contact the Salt L County Clerk, Elections Division at 385-468-8683	ake Entered	R	Date Received IECEIVED JAN 2 9 2018

Salt Lake County Clerk

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)	8	Ø	
E	XPENDITURES MADE			
2	TOTAL EXPENDITURES MADE (See Schedule B)	\$ 718.63	718.68	
В	ALANCE SUMMARY			
3	Balance at Beginning of Reporting Period	ø ·	Refer to Line 7 or	your last report
4	Total Contributions Received (From Line 1 Column A)	Ø		
5	Subtotal (Add Lines 3and 4)	Ø		
6	Total Expenditures Made (From Line 2 Column A)	718.68		
7	Balance at Close of Reporting Period (Subtract Line 6 from Line 5)	Ø		

Sc	h	e	d	u		e	A
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Itemized Contributions Received

Page	of
Candidate or Offi	ceholder's Last Name
Canadate of Offi	CCHOICE S LASE IVALIA

Date Received	nal pages if needed Name of Contributor	Complete Mailing Address	Occupation/Employer	Amount \$
	10			
	10/10			
	J			
		(J. O.		
		(V		
	/60			
UBTOTA	L FOR THIS PAGE			Ø
	NTRIBUTIONS RECEIVE	ED (Sum of subtotals from all Schede	ıle A pages)	Ø

Page	of
Candidate or Offi	iceholder's Last Name

Schedule B

Itemized Expenditures Made

attach additional p Date of Expenditure	Name of Recipient	Purpose	Amount of Expenditure	
-11-17	Vista print	Flyers	104.78	
	Daryll Acumen	Phene Tree	125:00	
-14-17	Banner Mania	Signs	*240.41	
-3-17	Kwik Kopy	graph Printing	138.91	
8-6-17	Office Max	Display Materials	41.09	
8-11-17	Office Max Orson Gygi Co.	Snacks	68.49	
			ŕ	
SUBTOTAL F	OR THIS PAGE		y	
TOTAL EXPE	NDITUTRES MADE (Sum of subt	totals from all Schedule B pages)	719-	1718 68

Page	of
Candidate or C Name	Officeholder's Last
Date of Repor	rt

Summary Page Other Campaign Accounts

(Complete this page after filling out Itemized Contributions from Other Campaign
Accounts and Itemized Expenditures from Other Campaign Accounts.

Only candidates with other open campaign accounts that are not County campaign accounts are required to complete these Summary Pages for Other Campaign Accounts).

			Column A Total this Peri	- 1	Column B Year to Date	
C	ONTRIBUTIONS RECEIVED					
1	TOTAL CONTRIBUTIONS RECEIVED FROM OTHER CAMPAIGN ACCOUNTS		Ø		8	
E	KPENDITURES MADE					
2	TOTAL EXPENDITURES MADE FROM OTHER CAMPAIGN ACCOUNTS		Ø		Ø	
В	ALANCE SUMMARY					
3	Balance at Beginning of Reporting Period	(1	4 F	Refer to Line 7 on your la	ast report
4	Total Contributions Received (From Line 1 Column A)	(3			
5	Subtotal (Add Lines 3and 4)	(
6	Total Expenditures Made (From Line 2 Column A)	Ś	Ø			
7	Balance at Close of Reporting Period (Subtract Line 6 from Line 5)	R	5			

Itemized Contributions from Other Campaign Accounts

Page	of
Candidate or Office	holder's Last Name

Attach additional pages or your own spreadsheet if needed Complete Mailing Occupation AND Date Amount **Name of Contributor Employer** Received Address SUBTOTAL FOR THIS PAGE TOTAL CONTRIBUTIONS RECEIVED (Sum of subtotals from all Itemized Contributions from Other Campaign Accounts pages)

Itemized Expenditures from Other Campaign Accounts

Page	of
Candidate or Offic	eholder's Last Name
Date of Report	

Attach additional pages or your own spreadsheet if needed Date of **Name of Recipient Purpose Expenditure Amount SUBTOTAL FOR THIS PAGE** TOTAL EXPENDITUTRES MADE (Sum of subtotals from all Itemized Expenditures from Other Campaign Accounts pages)