## **CAMPAIGN FINANCIAL DISCLOSURE**

To: Joey D Granger, Wasatch County Clerk/Auditor	* = Required
Full Name of Candidate*: AMBER GIBBS	
Street Address: 180 S - 100 E -	
City: Heber ,UT 84 032	
Name of Office*: WASATCH (OUNTY TREASURER Distr	ict:
Phone: 435-671-8085 Political Party (if applicable):	REPUBLICAN
REPORTS	TOTALS
1. Itemized total of all campaign <u>contributions</u> *  (from Table "A" on page 2)	s Ø
2. Itemized total of all campaign expenditures* (from Table "B" on page 2)	s Ø
3. Balance at the end of the reporting period* (Difference between lines 1 & 2)	s Ø
Treasurer or a tax-exempt organization as outlined in Utah Code 17-16-6.5.*  I do hereby certify that, to the best of my knowledge, all receipts and exp the following designated period (select only one)*:  Note: Financial Disclosures are due by 11:59pm on the due date  Partisan Convention Report: Covering Beginning of Candidacy to 12 day Filing Due date: 7 days before party convention. Convention Date:	enditures have been reported for s before party convention**
**Due date still applies to all partisan candidates regardless of convention participation	
Unaffiliated Report: Covering Beginning of Candidacy to Mar 18, 2024 –	Filing due date: March 23, 2024
☐ Primary Report: Covering Day after previous report end to Jun 13, 2024 -	Filing due date: June 18, 2024
Sept 30 Report: Covering Jun 14 to Sep 25, 2024 - Filing Due date: Sept	tember 30, 2024
General Report: Covering Sep 26 to Oct 24, 2024 – Filing Due date: Oc	tober 29, 2024
Year End Report: Covering Oct 25 to Dec 31, 2024 – Filing Due date: J	anuary 10, 2025
☐ Candidate Withdrawal/Disqualification/Elimination Report – <b>Due date va</b>	aries, within 30 days of exit
Signed*:	129/24

\*\*\* Email completed form & page 2 tables to elections@wasatch.utah.gov \*\*\*

## ITEMIZED **CONTRIBUTION** REPORT – TABLE "A"

Date of Donation	Name of Contributor	Amount	In-Kind / Tangible items (if applicable)
	TOTAL:	0%	

If additional space is needed, use additional sheets and list information in the above format and file with this report.

## ITEMIZED **EXPENDITURE** REPORT – TABLE "B"

Date of expenditure	Person or Organization to whom expenditure was made	Amount	Expenditure Purpose (optional)
	TOTAL:	0	

If additional space is needed, use additional sheets and list information in the above format and file with this report.