CAMPAIGN FINANCIAL D To: Joey D Granger, Wasatch County Clerk/Audite		
Full Name of Candidate*: Marcy Murray		
Street Address: 142 5 400 W		20
City: Heber, UT 84 <u>03</u> 2		
Name of Office*: Recorder	District:	
Phone: Political Party (if applical	ole): <u>Republican</u>	<u>n</u>
REPORTS	T	OTALS
1. Itemized total of all campaign <u>contributions</u> * (from Table "A" on page 2)	\$	Y
2. Itemized total of all campaign <u>expenditures</u> * (from Table "B" on page 2)	\$	\$
3. Balance at the end of the reporting period* (Difference between lines 1 & 2)	\$	/
 (initial) I acknowledge that all contributions received have been d and have not been mingled with a personal or business account.* (initial) I acknowledge that any anonymous donations exceeding a Treasurer or a tax-exempt organization as outlined in Utah Code 17-16-0 I do hereby certify that, to the best of my knowledge, all receipts at the following designated period (select only one)*: Note: Financial Disclosures are due by 11:59pm on the due date 	\$50 will be disbursed to 5.5.*	the UT State
 Partisan Convention Report: Covering Beginning of Candidacy to Filing Due date: 7 days before party convention. Convention **Due date still applies to <i>all</i> partisan candidates regardless of convention particular still applies to <i>all</i> partisan candidates regardless of convention particular still applies to <i>all</i> partisan candidates regardless of convention particular still applies to <i>all</i> particular still stil	n Date:	
Unaffiliated Report: Covering Beginning of Candidacy to Mar 18, 2		March 23, 2024
Primary Report: Covering Day after previous report end to Jun 13,		
Sept 30 Report: Covering Jun 14 to Sep 25, 2024 – Filing Due dat		
General Report: Covering Sep 26 to Oct 24, 2024 – Filing Due da		
☐ Year End Report: Covering Oct 25 to Dec 31, 2024 – Filing Due		
Candidate Withdrawal/Disqualification/Elimination Report – Due o		ays of exit
Signed*: Marci Mumay Date*: /)-29-2624	

*** Email completed form & page 2 tables to <u>elections@wasatch.utah.gov</u> ***

Candidate Signature

ITEMIZED CONTRIBUTION REPORT – TABLE "A"

Date of Donation	Name of Contributor	Amount	In-Kind / Tangible items (if applicable)
	N/H		29:24 RCUD W03:55
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			"ሬ ለ" የ _{ከራር} ያ ("ኬ") 8 4 ተ የየነ
			Ü1
	TOTAL:		

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 expenditur e	Person or Organization to whom expenditure was made	Amount	Expenditure Purpose (optional)
	NA		
	TOTAL:		