CAMPAIGN FINANCIAL REPORT

8/5 3:39
✓ ND

To: Nancy Dean, City Recorder of Clearfield City

For: Bryan Hoshoog (Full Name of Candidate) | 1320 W. 1045 S (Street) | Clearfield, Utah 84015 (City, State Zip)

Name of Office: City Council
Name of Office (Mayor or City Countil)

1. Total contributions greater than $500.00 (*Total from Form A*) ..... $ 0 -
2. Aggregate total of contributions of $500.00 or less ..... $ 0 -
3. Total campaign expenses (*Total from Form B*) ..... $ 25 -
4. Balance at the end of the reporting period ..... $ 0 -

I do solemnly swear that the information contained herein is true and accurate and reflects a complete record of my campaign contributions and expenditures for this reporting period.

Bryan Hoag
Candidate Signature

Aug 3, 2019
Date Signed

ITEMIZED CONTRIBUTION REPORT (*Form A*)

Date Received	Name of Contributor	Mailing Address and Zip Code	Amount of Contribution
		TOTAL (*Form A*)	$ -

ITEMIZED EXPENDITURE REPORT (*Form B*)

Date of Expenditure	Person or Organization To Whom Expenditure was made	Mailing Address and Zip Code	Amount of Expenditure
		TOTAL (*Form B*)	$ -

CAMPAIGN FINANCIAL REPORT

✓ND
9/12/19
1:00pm

To: Nancy Dean, City Recorder of Clearfield City

For: Bryan Glen Heag (*Full Name of Candidate*) 1320 W 1045 S (*Street*) Clearfield, Utah 84015 (*City, State Zip*)

Name of Office: City Council
Name of Office (Mayor or City Countil)

1. Total contributions greater than $500.00 (*Total from Form A*) ..... $ 0 -
2. Aggregate total of contributions of $500.00 or less ..... $ 0 -
3. Total campaign expenses *(Total from Form B)* ..... $ 0 -
4. Balance at the end of the reporting period ..... $ 0 -

I do solemnly swear that the information contained herein is true and accurate and reflects a complete record of my campaign contributions and expenditures for this reporting period.

Bryan Glen Heag
Candidate Signature

09/12/2019
Date Signed

ITEMIZED CONTRIBUTION REPORT (*Form A*)

Date Received	Name of Contributor	Mailing Address and Zip Code	Amount of Contribution
		TOTAL (*Form A*)	$ 0 -

ITEMIZED EXPENDITURE REPORT (*Form B*)

Date of Expenditure	Person or Organization To Whom Expenditure was made	Mailing Address and Zip Code	Amount of Expenditure
		TOTAL (*Form B*)	$ 0 -