

SHERRIE SWENSEN
Salt Lake County Clerk
 2001 South State Street, Suite #S1100
 Salt Lake City, Utah 84190-1051
 Fax# 468-3473

**Financial Disclosure Report
 For a Candidate**

Name of Candidate or Officeholder		Office	Political Party	
JEREMY VOTAW		COUNTY CLERK	REP	
Street Address and Apartment Number		City	State	Zip Code
Office Sought	District Number	Phone Number	Fax #	Email Address
COUNTY CLERK	N/A			

Type of Report
 (Check the appropriate box)

INTERIM REPORTS: (Required only during election years)

April 5

Seven days before a primary election

September 15

Seven days before a general election

YEAR-END REPORT:

January 31 of each year (Required by all open campaign committees)

FINAL / DISSOLUTION REPORT:

Final / Dissolution Report – *The campaign is no longer active or receiving contributions and the campaign account balance is zero.*

Is this report an amendment?

Yes (If yes, date of report) _____

No

Report Verification

I, JEREMY VOTAW
 Print Name of Candidate or Officeholder

affirm that this Financial Disclosure Report is true, accurate and correct to the best of my knowledge.

[Signature] 4/5/10
 Signature of Candidate or Officeholder Date

For more information or additional forms, visit www.clerk.slco.org or contact the Salt Lake County Clerk, Elections Division at 468-3427.


For Office Use Only	Date Received
Entered _____	_____
Copied _____	_____

RECEIVED
 MAR 30 2010
 SALT LAKE COUNTY CLERK

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Candidate or Officeholder'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
CONTRIBUTIONS RECEIVED			
1	TOTAL CONTRIBUTIONS RECEIVED (See Schedule A)	0	0
EXPENDITURES MADE			
2	TOTAL EXPENDITURES MADE (See Schedule B)	0	0
BALANCE SUMMARY			
3	Balance at Beginning of Reporting Period	0	 Refer to Line 7 on your last report
4	Total Contributions Received (From Line 1 Column A)	0	
5	Subtotal (Add Lines 3 and 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	

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Candidate or Officeholder's Last Name	
Date of Report	

Schedule A

Itemized Contributions Received

Attach additional pages if needed

Date Received	Name of Contributor	Complete Mailing Address	Occupation/Employer	Amount \$
	N/A			
SUBTOTAL FOR THIS PAGE				
TOTAL CONTRIBUTIONS RECEIVED (Sum of subtotals from all Schedule A pages)				

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Schedule B

Itemized Expenditures Made

Attach additional pages if needed

Date of Expenditure	Name of Recipient	Purpose	Amount of Expenditure
	N/A		
SUBTOTAL FOR THIS PAGE			
TOTAL EXPENDITURES MADE (Sum of subtotals from all Schedule B pages)			