



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 Tracy Scott Cowdell		Office Canyons Board of Ed #4	Political Party	
Street Address and Apartment Number		City	State	Zip Code 0
Office Sought Canyons Board of Ed #4	District Number	Phone Number 801-566-4287	Fax #	Email Address tcowdell@aitsinc.com

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- Final / Dissolution Report – *The campaign is no longer active or receiving contributions and the campaign account balance is zero.*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, Tracy Scott Cowdell
Print Name of Candidate or Officeholder

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

Signature of Candidate or Officeholder 25 Oct 2010
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	RECEIVED
Copied	OCT 26 2010
SALT LAKE COUNTY CLERK	

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Candidate or Officeholder's Last Name Coddell	
Date of Report 25 Oct 2010	

Summary Page

(Complete this page after filling out Schedule A and Schedule B)

		Column A Total this Period	Column B Year-to-Date 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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Schedule A

Itemized Contributions Received

Attach additional pages if needed

Date Received	Name of Contributor	Complete Mailing Address	Amount of Contribution
			n/a
SUBTOTAL FOR THIS PAGE			0
TOTAL CONTRIBUTIONS RECEIVED (Sum of subtotals from all Schedule A pages)			0

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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			0
TOTAL EXPENDITURES MADE (Sum of subtotals from all Schedule B pages)			0