



**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 Education	Political Party N/A	
Street Address and Apartment Number		City	State	Zip Code
Office Sought Board of Education	District Number # 4	Phone Number	Fax #	Email Address

**Type of Report**  
 (Check the appropriate box)

<p><b>INTERIM REPORTS:</b> (Required only during election years)</p> <p><input type="checkbox"/> April 5</p> <p><input checked="" type="checkbox"/> Seven days before a primary election</p> <p><input type="checkbox"/> September 15</p> <p><input type="checkbox"/> Seven days before a general election</p>	<p><b>YEAR-END REPORT:</b></p> <p><input type="checkbox"/> January 31 of each year (Required by all open campaign committees)</p> <p><b>FINAL / DISSOLUTION REPORT:</b></p> <p><input type="checkbox"/> Final / Dissolution Report – <i>The campaign is no longer active or receiving contributions and the campaign account balance is zero.</i></p> <p>Is this report an amendment?</p> <p><input type="checkbox"/> Yes (If yes, date of report) _____</p> <p><input type="checkbox"/> No</p>
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**Report Verification**

TRACY S. 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]      Jun 14, 2010  
 Signature of Candidate or Officeholder      Date

For more information or additional forms, visit [www.clerk.slco.org](http://www.clerk.slco.org) or contact the Salt Lake County Clerk, Elections Division at 468-3427.

<b>For Office Use Only</b>	<b>Date Received</b>
Entered _____	
Copied _____	
<b>RECEIVED</b>	

JUN 15 2010  
 SALT LAKE COUNTY CLERK

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Candidate or Officeholder's Last Name Cowdell	
Date of Report June 14, 2010	

# Summary Page

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

		Column A Total this Period	Column B Aggregate Total
<b>CONTRIBUTIONS RECEIVED</b>			
1	TOTAL CONTRIBUTIONS RECEIVED (See Schedule A)	0	0
<b>EXPENDITURES MADE</b>			
2	TOTAL EXPENDITURES MADE (See Schedule B)	0	0
<b>BALANCE SUMMARY</b>			
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 Cowdell	
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# Schedule A

## Itemized Contributions Received

Attach additional pages if needed

Date Received	Name of Contributor	Complete Mailing Address	Occupation/Employer	Amount \$
n/a	None			0
<b>SUBTOTAL FOR THIS PAGE</b>				0
<b>TOTAL CONTRIBUTIONS RECEIVED</b> (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			0
<b>SUBTOTAL FOR THIS PAGE</b>			0
<b>TOTAL EXPENDITURES MADE</b> (Sum of subtotals from all Schedule B pages)			0