



Salt Lake County Clerk
2001 South State Street, Suite #S1100 Salt Lake
City, Utah 84114-4575
Phone# 385-468-8683 Fax# 385-468-7401

2016 Financial Disclosure Report
For a Candidate

Name of Candidate or Officeholder: Deidre 'Tiffanus' Sandberg, Office: Salt Lake City School Board, Political Party: Precinct 1
Street Address and Apartment Number, City, State, Zip Code

Type of Report (Check the appropriate box)
INTERIM REPORTS: (Required only during election years)
[] April 5
[X] 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[] Final / Dissolution Report - The campaign is no longer active or receiving contributions and the campaign account balance is zero.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, Deidre Tiffanus Sandberg
Print Name of Candidate or Officeholder
affirm that this Financial Disclosure Report is true, accurate and correct to the best of my knowledge.
Deidre Tiffanus Sandberg Signature of Candidate or Officeholder
6/21/16 Date

For more information or additional forms, visit www.clerk.slco.org or contact the Salt Lake County Clerk, Elections Division at 385-468-8683

For Office Use Only
Entered:
Completed:
Date Received:
RECEIVED IN OFFICE

JUN 21 2016

SALT LAKE COUNTY CLERK

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Candidate or Officeholder's Last Name			
Sandberg			
Date of Report			
6/21/16			

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	92.71	◀ 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)	92.71	

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Candidate or Officeholder's Last Name			
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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 \$
SUBTOTAL FOR THIS PAGE				
TOTAL CONTRIBUTIONS RECEIVED (Sum of subtotals from all Schedule A pages)				

0

0

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Candidate or Officeholder's Last Name			
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Schedule B

Itemized Expenditures Made

Attach additional pages if needed

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