## **2024 FINANCIAL CAMPAIGN REPORT**

The financial campaign law is in the Utah Code with a reference of 17-16-6.5.

To the RICH County Clerk/Auditor

Reporting Period: 2 Jan - 25 Mar

| Full Name of Candidate: Peter C. Comin            |
|---|
| Street Address: 1990 E. Hatch Lane                |
| City & Zip: Randolph , UT 84064                   |
| Home Phone: 435-179-0013 Business Phone:          |
| Name of Office: School Board                      |
| Office Precinct (if applicable): 5 chool Band # 2 |
| Political Party (if applicable):                  |
| Date: 3/29/24 Signature: Poten Camin              |

| Total Contributions of donors who gave more than \$50.00 (from "A" on page 2 of this report) |
|--|
| Agregate total of contributions \$50.00 or less  |
| Total Campaign expenses (from form "B" on page 3 of this reporting period)                   |
| Balance at the end of this reporting period  |

|   |    | Totals From | To | tals For This | (  | Cumulative |
|---|----|-------------|----|---------------|----|------------|
|   | _  | Last Report |    | Report        |    | Totals     |
| 1 | \$ | 0           | \$ | 0             | \$ | 0          |
|   | \$ | 6           | \$ | 0             | \$ | 0          |
|   | \$ | 0           | \$ | 0             | \$ | 0          |
|   | \$ | 0           | \$ | 0             | \$ | 0          |

## ITEMIZED CONTRIBUTION REPORT (Form "A")

| Date | Name of Contributors-\$50.00+ Mailing Address & Zip Code |                    | Amount |  |
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|      | Total of Dona  | tions over \$50.00 | \$0.00 |  |

| Date | Name of Contributors - \$50 or<br>Less | Mailing Address & Zip Code | Amount    |
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|      | Total of CCO                           | O and Under Denetions      | r co      |
|      | 10tal 01 \$50.0                        | 0 and Under Donations      | \$0.      |

## ITEMIZED EXPENDITURE REPORT (Form "B")

| Date of | D                           | Durance of Evenenditure | Amount            |
|---------|-----------------------------|-------------------------|-------------------|
| Expense | Person or Organization Paid | Purpose of Expenditure  | Amount            |
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|         |                             | E TOTALS                | \$0.              |