



FINANCIAL CAMPAIGN REPORT FOR COUNTY CANDIDATES

(Utah County Code 2-5 & Utah State Code 17-16-6.5)

Name of Candidate or Officeholder LARRY BALLARD		Political Party NA	
Street Address and Apartment Number 119 WEST SALEM CANAL ROAD	City SALEM	State UTAH	Zip Code 84653
Office Seeking NFSD SCHOOL BOARD SEAT #4	Area Code & Phone Number 801-423-2324	Area Code & Fax Number	

County & Local School Candidates

Type of Report
(Check the appropriate box)

INTERIM REPORTS

- 30 Days after withdraw or elimination
- Seven days preceding the Primary Election
(Candidates on the primary ballot need to report expenditures 10 days prior to the date of election)
- 30 Days after the Primary Election
(if eliminated at the Primary)
- Seven days preceding the General Election
(report expenditures 10 days prior to the date of election)
- 30 Days after the General Election

Is this report an amendment?
 Yes, Date of Report _____
 No

Report Verification

I, LARRY BALLARD
Print Name of Candidate

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

Larry Ballard 7/23/16
Signature of Candidate Date

To File this Form
Mail or deliver to
Utah County Clerk's Office
100 East Center St., Rm 3100
Provo, Utah 84606
Fax (801) 851-8122
For More Information
Contact the Election's Office
(801) 851-8127

For Office Use Only
Date received

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Page		of
Candidate or Officeholder's Last Name		
Date of Report		

SUMMARY PAGE

(NOTE: 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	



SCHEDULE A

ITEMIZED CONTRIBUTIONS RECEIVED

(Attach additional pages if needed)

Page _____	of _____
Candidate or Officeholder's Last Name	
Date of Report	

Date	Name of Contributor	Mailing Address & Zip Code	Amount
_____	<i>HOWE</i>	_____	_____
_____		_____	_____
_____		_____	_____
_____		_____	_____
_____		_____	_____
_____		_____	_____
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_____		_____	_____
_____		_____	_____
_____		_____	_____
_____		_____	_____
_____		_____	_____

Subtotal for this page \$ _____

Total Contributions Received (Sum of subtotals from all Schedule A pages) \$ _____



SCHEDULE B

ITEMIZED EXPENDITURES MADE

(Attach additional pages if needed)

Page _____	of _____
Candidate or Officeholder's Last Name	
Date of Report	

Date	Provider/Vendor	Mailing Address & Zip Code	Amount

Subtotal for this page \$ _____

Total Expenditures Received (Sum of subtotals from all Schedule B pages) \$ _____