FILING PERIOD: From ___12/3/21_____ To _____9/30/23_____

NAME OF CANDIDATE _____Dave Young_____

NAME OF OFFICE _____Mayor_____

1. Total contributions of donors more than $50.00 ...$ ____0_____

2. Aggregate total of contributions of $50.00 or less$ ____0_____

3. Total campaign expenditures .....$ ____0_____

Date __10/2/23___ Signed _____

OREM
FAMILY CITY USA

**Cash Contributions**

| Date | Name of Donor | Amount |
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| | **TOTAL** | **$0.00** |

**In-Kind Contributions**

| Date | Name of Donor | Estimated Amount |
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| | TOTAL | $0.00 |

**Cash Expenditures**

| Date | Name of Recipient | Political Purpose | Amount |
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| | | TOTAL | $0.00 |

*(If additional space is needed, use blank paper and list information using same format as above and attach to this statement)*