



## FINANCIAL CAMPAIGN REPORT

Campaign Financial Disclosure Per Title 1 Chapter 7 of Washington County Code of Ordinances

Full name of Candidate Ryan Sullivan

Street Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Email electryansullivan@gmail.com Phone (435) 767-1731

Candidate for Office Of Clerk-Auditor

|                                                                          | Total LAST Report + | Total THIS Report = | Cumulative Report |
|--------------------------------------------------------------------------|---------------------|---------------------|-------------------|
| Total contributions of donors who gave more than \$50.00 (from form "A") | 0.00                | 345.10              | 345.10            |
| Aggregate total of contributions of \$50.00 or less                      | 0.00                | 0.00                | 0.00              |
| Total campaign expenses (from form "B")                                  | 0.00                | 345.10              | 345.10            |
| Balance at the end of this reporting period                              | 0.00                | 0.00                | 0.00              |

I do hereby certify that, to the best of my knowledge, all receipts and expenditures have been reported for the period

Beginning

24-Jan

Ending

24-Jun

and that there are no bills or obligations outstanding and unpaid except as set forth in this report.

Signature

RKS

Date

6/12/2024

RECEIVED

JUN 12 2024

WASHINGTON COUNTY  
CLERK/AUDITOR







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Candidate for Office Of Clerk-Auditor

|                                                                          | Total LAST Report + | Total THIS Report = | Cumulative Report |
|--------------------------------------------------------------------------|---------------------|---------------------|-------------------|
| Total contributions of donors who gave more than \$50.00 (from form "A") | \$ 345.10           | \$ -                | \$ 345.10         |
| Total campaign expenses (from form "B")                                  | \$ 345.10           | \$ -                | \$ 345.10         |
| Balance at the end of this reporting period                              | \$ -                | \$ -                | \$ -              |

I do hereby certify that, to the best of my knowledge, all receipts and expenditures have been reported for the period

Start Date 7/1/2024 End Date 10/15/2024

and that there are no bills or obligations outstanding and unpaid except as set forth in this report.

RKS  
Candidate Signature

10/15/2024  
Date

\_\_\_\_\_  
Committee Secretary Signature (if different)

\_\_\_\_\_  
Date

Office Use Only

10/15/2024  
Date Received

\_\_\_\_\_  
Clerk/Auditor Signature (verifying inspection)

\_\_\_\_\_  
Date

## Itemized Contribution Report (Form "A")

## Itemized Expenditure Report (Form "B")



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|                                                                          | Total LAST Report + | Total THIS Report = | Cumulative Report |
|--------------------------------------------------------------------------|---------------------|---------------------|-------------------|
| Total contributions of donors who gave more than \$50.00 (from form "A") | \$ 345.10           | \$ -                | \$ 345.10         |
| Total campaign expenses (from form "B")                                  | \$ 345.10           | \$ -                | \$ 345.10         |
| Balance at the end of this reporting period                              | \$ -                | \$ -                | \$ -              |

I do hereby certify that, to the best of my knowledge, all receipts and expenditures have been reported for the period

Start Date 10/16/2024 End Date 12/6/2024

and that there are no bills or obligations outstanding and unpaid except as set forth in this report.

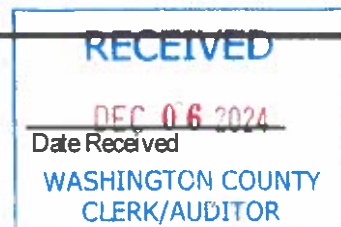
[Signature]  
Candidate Signature

12/6/2024  
Date

\_\_\_\_\_  
Committee Secretary Signature (if different)

\_\_\_\_\_  
Date

Office Use Only



[Signature]  
Clerk/Auditor Signature (verifying inspection)

12/9/2024  
Date

Eric Clarke, Washington County Attorney  
(Designated inspector for filings for the office of Washington County Clerk-Auditor)



## Itemized Contribution Report (Form "A")

Full Name of Candidate Ryan Sullivan

Candidate for Office Of Clerk-Auditor

| Date                | Name of Donor | Mailing Address and Zip Code | Amount | In Kind?<br>Y/N |
|---------------------|---------------|------------------------------|--------|-----------------|
|                     |               |                              |        |                 |
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|                     |               |                              |        |                 |
|                     |               |                              |        |                 |
| TOTAL CONTRIBUTIONS |               |                              | \$ -   |                 |



## Itemized Expenditure Report (Form "B")

Full Name of Candidate Ryan Sullivan

Candidate for Office Of Clerk-Auditor

| Date               | Person or Organization Paid | Purpose of Expenditure | Amount |
|--------------------|-----------------------------|------------------------|--------|
|                    |                             |                        |        |
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|                    |                             |                        |        |
|                    |                             |                        |        |
| TOTAL EXPENDITURES |                             |                        | \$ -   |