# Contributions & Expenditures Report

(PLEASE COMPLETE REQUIRED SECTIONS)

FILING OFFICE: COUNTY CLERK Office Use Only



1. Reporting Period:	
Statement covers period of $8 p   2022$ to $  1   0   2022$	¥
(mm/dd/yyyy) (mm/dd/yyyy)	
2. Type of Report (Please select one option.):	Cassial Election
Time, Continuos de Exposition (1)	Special Election
General Contributions & Expenditures: November 1, 2022	Amendment
Contributions & Expenditures: Dec 31, (odd-year)	
3. Are you terminating the committee with this report?	VI 5. VI 2X
(Note: A committee must have retired all debts before terminating. WS 22-25-	106(b)(iii))
Yes No	
4. Candidate or Committee Information:	
Anna Carlotte Com Sunta Villa	100 Board
	307 899 3966
Street Address 1	00 7 0 7 1 = 1
Cidn, WY 82414	
(City, Stafe, Zip)	_ 112_3 - 1 2
5. Contributions:	
Did you have contributions or expenditures to report for this filing period?	Yes No
If yes, please complete A-C below.	
A. Contributions	_
1. Personal contributions by candidate (including immediate family) (	p 2) \$
2. Contributions from individuals (p 3)	\$
3. Contributions from PACs (p 4)	\$ <u>O</u>
4. Contributions from political parties (p 4)	\$ \$
5. Anonymous contributions ( p 5)	Y
6. In-kind contributions (p 5)	\$  500 - \$ 9
7. Loans (p 6)	\$ <u> </u>
8. Un-itemized contributions – defined as less than \$100 (p 6)	s 1570 -
B. Total Contributions for this Filing Period (sum of A1-A8)	\$ 156
C. Total Expenditures for this Filing Period (p 7)	<u> </u>
6. Signature:	
	nowledge and helief, it is true,
I certify that I have examined this statement and, to the best of my kr	lowicage and series, in
correct and complete.	1
	and
Committee Chairman Signature Committee Treasurer Signature	Candidate Signature
	11/01/2022
Date Date	Date

## **Itemization of Contributions**

(Use Additional Sheets as Necessary)

# Contributions - Personal Contributions by Candidate

(Including candidate's immediate family)

Name	Address (City, State, Zip)	Date	Amount
	*		\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
		8	\$
			\$
			\$

### Contributions – Individuals

(Contributions from corporations, unions, partnerships, and associations are prohibited. Contributions from sole proprietorships are legal, but must be identified as such.)

Name	Address (City, State, Zip)	Date	Amount
-			\$
			\$
			\$
			\$
			\$
			\$
The second secon			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$

## **Contributions** – Political Action Committees

Name (Identify by Full Name)	Address (City, State, Zip)	Date	Amount
			\$
			\$ .
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$

# Contributions – Political Party Central Committees

Name	Address (City, State, Zip)	Date	Amount
			\$
			\$
			\$
			\$
			\$
	£.		\$
			\$
			\$
			\$
			\$
1139			\$

	C	on	tri	hu	tio	ns -	Δn	٥n١	/mo	HS
1	L	on	luri	DU	LIUI	11 <b>5</b> —	AII	OH		us

(Anonymous contributions are those contributions whose origins cannot be determined, i.e., "pass the hat" contributions. An anonymous contribution does not mean a contributor may donate to the candidate or PAC with the understanding the contributor's name will not be reported.)

Event	Date	Amount
		\$
		\$
	×.	\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$

I do not know, nor can I ascertain, the origin of the above anonymous contributions.

Sianature	of Candidate,	Chairman oi	r Treasurer

Date

#### Contributions - In-Kind

(In-Kind contributions are goods and services in place of cash. For example, someone purchases stamps for a mailing and donates the stamps; this is an in-kind contribution.)

Name	Address (City, S	tate, Zip)	Description	Amount/Value
Bob Berry	Codn WY		Billboards/Advertion	\$ 1500-
Die Verry	٠,		,	\$
				\$
				\$
4				\$
				\$
				\$
				\$
	~			\$
				\$

#### Contributions - Loans

Name	Date	Amount
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$

#### Contributions - Unitemized Contributions

(Contributions under \$100.00. For example, you have a chili dinner. Tickets are \$10.00 each and you sell 500 tickets. You may report these in aggregate here by reporting \$5,000.00)

Description	Date	Amount
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$

	Obligations Address (City, State, Zip)	Purpose	Date		unt
Payee	Address (City, State, 219)	•		\$	
		T T T T		\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
		1)		\$	
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			_	\$	
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				\$	
				-   \$	
					\$
					\$
					\$
					\$
					\$
					\$

\$ 1.515 million with the second of the secon	V 3
	377 1
and the second s	
Total Expenditures:	
Total expellulurus	