

Contributions Report

(PLEASE COMPLETE REQUIRED SECTIONS)

LARAMIE COUNTY CLERK
CHEYENNE, WY

FILING OFFICE: COUNTY CLERK
2018 AUG ~~OFFICE USE ONLY~~ 8 12:55

1. Reporting Period:

Statement covers period of 11/1/18 to 8/14/18
(mm/dd/yyyy) (mm/dd/yyyy)

2. Type of Report (Please select one option.):

- Pre-Primary Contributions: Aug 14th, 2018
 Pre-General Contributions: Oct 30th, 2018
 Pre-Special Election
 Amendment

3. Candidate or Committee Information:

Name: THOMAS SCRANTON Office Sought: LARAMIE CO. COMMISSIONER
Address: 8800 JACK RABBIT RD. Phone Number: (307) 631-3184
(Street Address)
CHEYENNE WY 82009
(City, State, Zip)

4. Contributions:

Did you have contributions 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)	\$ <u>25⁰⁰</u>
2. Contributions from individuals (p 3)	\$ <u>—</u>
3. Contributions from PACs (p 4)	\$ <u>—</u>
4. Contributions from political parties (p 4)	\$ <u>—</u>
5. Anonymous contributions (p 5)	\$ <u>—</u>
6. In-kind contributions (p 5)	\$ <u>—</u>
7. Loans (p 6)	\$ <u>—</u>
8. Un-itemized contributions – defined as less than \$25 (p 6)	\$ <u>—</u>
B. Total Contributions for this Filing Period (sum of A1-A8)	\$ <u>25⁰⁰</u>

5. Signature:

I certify that I have examined this statement and, to the best of my knowledge and belief, it is true, correct and complete.

N. A.
Committee Chairman Signature

N. A.
Committee Treasurer Signature

T. Scranton
Candidate Signature
8/8/18
Date

Date

Date

Date

Itemization of Contributions

(Use Additional Sheets as Necessary)



(Including candidate's immediate family)

Name	Address (City, State, Zip)	Date	Amount
Tom SCRANTON	██ CHEYENNE, WY 82009	5/17/18	\$ 25 ⁰⁰
			\$
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			\$
			\$
			\$

(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
			\$
NONE			\$
			\$
			\$
			\$
			\$
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			\$
			\$
			\$

Political Action Committees

Name (Identify by Full Name)	Address (City, State, Zip)	Date	Amount
			\$
NONE			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$

Political Action Committees

Name	Address (City, State, Zip)	Date	Amount
			\$
NONE			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$

(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.)

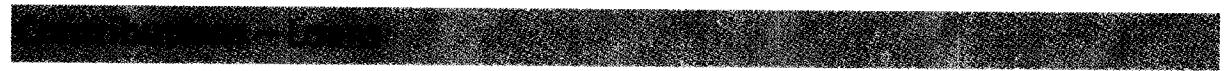
Name	Address (City, State, Zip)	Date	Amount
			\$
NONE			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$

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

Signature of Candidate, Chairman or Treasurer

Date

Name	Address (City, State, Zip)	Date	Amount/Value
			\$
NONE			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$



Name	Date	Amount
		\$
None		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$



(Contributions under \$25.00. 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)

Contribution Type	Date	Amount
		\$
None		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$