

Candidate Financial Disclosure



Financial Campaign Report for County Offices

Name of Candidate			
Barbara Yost Tidwell			
Address	City	State	Zip Code
149 W. 730 N.	Logan	UT	84321

Office	Phone Number
County Council Seat 2	435. 757. 3524
	Email
	gbtidwell@comcast.net

Type of Report	
<p>Mark the applicable report</p> <p><input type="radio"/> 30 Days after withdrawal or elimination</p> <p><input type="radio"/> Seven days preceding the Primary Election <small>Candidates on the Primary Ballot must report contributions and expenditures made 10 days prior to the date of the election.</small></p> <p><input type="radio"/> 30 Days after the Primary Election <small>If eliminated at the Primary Election</small></p> <p><input checked="" type="radio"/> Seven days preceding the General Election <small>Candidates on the General Ballot must report contributions and expenditures made 10 days prior to the date of the election.</small></p> <p><input type="radio"/> 30 Days after the General Election</p>	
<p>Is this report an amendment?</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> Yes, Date of Original Report _____</p>	

Affirmation	I, <u>Barbara Yost Tidwell</u>
	Printed Name of Candidate
<p>affirm that this Report of Contributions and Expenditures is true, accurate and correct to the best of my knowledge.</p>	

Signature	Date
<u>Barbara Yost Tidwell</u>	10/29/24

Where to File	
<p>Email: elections@cachecounty.gov</p> <p>Mail: 179 North Main St. Suite 102 Logan, Utah 84321</p>	
Date of Report	Page

Office Use Only
<p><input type="radio"/> Logged</p> <p>Web</p> <p>Transmission</p>

CLERK/AUDITOR RVD
 2024 OCT 29 AM 12:28

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Schedule A - Itemized Contributions Received

Attach additional pages as needed

Date	Name of Contributor	Address and Zip Code	Amount
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N/A

Name of Candidate Barbara Yost Tidwell	
Date of Report 10/29/24	Page

Subtotal for this page \$ X

Total Contributions Received \$ X
Sum of all Schedule A pages in this report

Candidate Financial Disclosure



Schedule B - Itemized Expenditures Made

Attach additional pages as needed

Date	Provider/Vendor	Purpose	Amount
7/12/2024	Square One Printing	Print yard signs and cards	301.13

Name of Candidate	
Barbara Yost Tidwell	
Date of Report	Page
10/29/24	

Subtotal for this page \$ 301.13

Total Expenditures Made \$ 301.13
Sum of all Schedule B pages in this report

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Summary Page

Note: Complete this page after filling out Schedule A and Schedule B



Balance at Beginning of Reporting Period	
A \emptyset	
Contributions Received this Period	Contributions Received Year to Date
B \emptyset	C \emptyset
Expenditures Made this Period	Expenditures Made Year to Date
D 301.13	E 301.13
Subtotal before Expenditures (Box A + Box B)	
F 301.13	
Balance at Close of Reporting Period (Box F - Box D)	
301.13	

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630 West 200 North • Logan, Utah 84321
 Tel: 435.753.8875 • Fax: 435.753.1581
 email:orders@sql.biz • www.sql.biz

INVOICE 442142

Date: 07/12/2024
Last Revised: 07/22/2024
Due Date: 07/17/2024
Time: 4:00PM
Invoice Date: 07/22/2024

Customer 0
 BARBARA TIDWELL
 ATTN: 435-757-3524 (CALL)

Order Description
 YARD SIGNS, BUSINESS CARDS, THANK YOU CARDS
 WITH ENVLEOPES

Order Taken By: KM **Salesperson:** KM

E-mail: gbtidwell@comcast.net

ORIG	QTY	SIDES	DESCRIPTION	PAPER	PRICE						
1	300	1	BUSINESS CARDS FINISHING: CUTTING	100# WHT GLOSS COVER	\$36.10						
1	25	1	FOLD OVER CARDS PRE-PRESS: 0 PRE-PRESS FINISHING: CUTTING SCORE	80# CV WHT ULTRA WHT	\$42.90						
1	25	1	BLANK ENVELOPES	70# ALL 4 BAR EPS	\$2.43						
1	20	1	YARD SIGNS, RE-ELECT BARBARA TIDWELL		\$200.00						
<table border="0" style="width:100%"> <tr> <td style="text-align:left">Quantity</td> <td style="text-align:right">Total Price</td> <td style="text-align:right">Price/1000</td> <td style="text-align:right">Price/EA</td> <td colspan="2"></td> </tr> </table>						Quantity	Total Price	Price/1000	Price/EA		
Quantity	Total Price	Price/1000	Price/EA								

Ship-To **Ship Via:** PICK UP

SUBTOTAL \$281.43

State Tax \$19.70

TOTAL \$301.13

AMOUNT PAID \$301.13

BALANCE DUE \$0.00

Payment Due Date Paid In Full

RECEIVED BY: _____ Date: _____

INVOICE