State Elected Official Financial Disclosure Form

Name of Official:	Dalton Banks
Office Held:	Dalton Banks Representative
Ser	nate District (if applicable):
Но	use District (if applicable): 6
Business Address:	
Business City, State and Z	Zip:
Business Phone:	
Home Address:	289 E Main St.
Home City, State and Zip	289 E Main St. Cowley WY 82420
Home Phone:	(367) 272-7255

RECEIVED

By Wyoming Secretary of State at 12:57 pm, Jan 28, 2025

I. Offices, Directorships and Employment

(Please use additional sheets as necessary.)

Office Held	Name and Address of Enter
,	
	- ,
	
List any directorship positions held in busines	
Name of Enterprise	Address of Enterprise
Salaried Employment	
Job Title	Name and Address of Enterp
Maintenance operator	City of Powe Powell, WY
	Powell, WY

II. Sources of Income

(Please use additional sheets as necessary.)

a)	Employment Name of Employer	Address of Employer
	City of Powell	Powell, WY
b)	business interest (W.S. 9-13-108 (c) states: "	ses of all business entities in which you have a Name and address of all business entities but of the entity is owned, or sole proprietorship from
	Name of Business Entity A/D Ranch	Address of Business Entity
c)	Investments	Income Earned
	A. Any security or interest earnings	Yes No
	B. Real estate, leases, royalties	YesX_ No
d)	Other (describe generally):	

III. Contracts

(Please use additional sheets as necessary.)

	Name of Enterprise	Address of Enterprise
	Name of State Entity	Address of State Entity
0	Please provide the following informa	
		ation for the contract:
	Please provide the following informations:	ation for the contract:
	Please provide the following information: Type: Description:	ation for the contract:
	Please provide the following information: Type: Description:	ation for the contract:
	Please provide the following information: Type: Description:	ation for the contract:

Signature