## 2025 MUNICIPAL DECLARATION OF CANDIDACY

Please note that the information on this form may be available to the public in accordance with Utah State Code 63G-2-301 and 63G-2-201.

Bruce
IRST NAME (as it will appear on the ballot)  MIDDLE NAME (as it will appear on the ballot)
AST NAME (as it will appear on the ballot)
or the office of
or the city/town of Howell Town.
tate of Utah ounty of Box Elder ss.
penalty of perjury, say that I reside at 18380 w 15200
andidates must provide the filing officer with an email address at the time of filing if the candidate wishes to display
candidate profile on the Statewide Electronic Voter Information website. 20A-9-203(4)(c)(iv)(B)
Signature of Candidate (must be signed in the presence of the filing officer)
bscribed and sworn to before (filing officer name) on this (month/day/year)  (Seal, W CORPORTING (City or town) (Date Received)

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	Byron James
	FIRST NAME (as it will appear on the ballot)  MIDDLE NAME (as it will appear on the ballot)
	TUCK
	LAST NAME (as it will appear on the ballot)
	for the office of $Mayor$ for the $4$ (two or four-year) term for the city/town of $4$ .
1	for the city/town of Howell.
	State of Utah County of $Box Elder$ ss.  I, $Byvou$ James Juck, being first sworn and under
1	penalty of perjury, say that I reside at 16420 W 13600 N
	Street, City of Howell, County of Box Elder, state of
Į	Utah, Zip Code <u>&amp;43/6</u> , Telephone Number (if any) <u>435-279-0789</u> ;
t	that I am a registered voter; and that I am a candidate for the office of
	stating the term). I will meet the legal qualifications required of candidates for this office. If filing via a
(	designated agent, I attest that I will be out of the state of Utah during the entire candidate filing period. I will file
2	all campaign financial disclosure reports as required by law and I understand that failure to do so will result in
1	my disqualification as a candidate for this office and removal of my name from the ballot. I request that my name
ł	be printed upon the applicable official ballots.
Ē (	Byron. tuck 66 @ gmail. com  mail Address one that is closely monitored)
(	andidates must provide the filing officer with an email address at the time of filing if the candidate wishes to display
a	candidate profile on the Statewide Electronic Voter Information website. 20A-9-203(4)(e)(iv)(B)
	Byun kmo Tuck
	Signature of Candidate  (must be signed in the presence of the filing officer)
S	Subscribed and sworn to before (filing officer name) on this (month/day/year)
	SEAL STATE (month/day/year)
	(Sea) OWN CORPUTE (City or town) (Date Received)
	The state of the s

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	Bradly Lawrence
FIRST	NAME (as it will appear on the ballot)  MIDDLE NAME (as it will appear on the ballot)
	Hawkes
LAST	NAME (as it will appear on the ballot)
for the	office of for the (two or four-year) term
for the	city/town of Howell.
State of County	
Ι,	Bradly Hankes , being first sworn and under
penalty	of perjury, say that I reside at 18805 W 14400 N
Street,	City of Howell, County of Box Elder, state of
Utah, Z	ip Code <u>84316</u> , Telephone Number (if any) <u>435-279-4369</u> ;
that I a	m a registered voter; and that I am a candidate for the office of
	the term). I will meet the legal qualifications required of candidates for this office. If filing via a
	ited agent, I attest that I will be out of the state of Utah during the entire candidate filing period. I will file
	paign financial disclosure reports as required by law and I understand that failure to do so will result in
my dis	qualification as a candidate for this office and removal of my name from the ballot. I request that my name
be prin	ted upon the applicable official ballots.
Email A	Jeanmehawles@gmail.com  ddress t is closely monitored)
Candid	ates must provide the filing officer with an email address at the time of filing if the candidate wishes to display
a candi	date profile on the Statewide Electronic Voter Information website. 20A-9-203(4)(c)(iv)(B)
	Signature of Candidate (must be signed in the presence of the filing officer)
Subscri	bed and sworn to before on this on this (filling officer name) (month/day/year)
No.	Howell 6-4-2025
William OV	(City or town) (Date Received)