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.

McKen-	210	Nicole		
FIRST NAME	E (as it will appear on the ballot)	MIDDLE NAME (as it w	ill appear on the ballot)	
Sorense	n			
LAST NAME	(as it will appear on the ballot)			
for the office of	f Town Council	for the TOW	_ (two or four-year) term	
for the city/town	n of towell	·		
State of Utah County of	Box Elder	ss.		
I, MCK	enzie Nicole Sovensen	, being f	first sworn and under	
penalty of perju	ry, say that I reside at 14505	N 17200 W		
Street, City of Howal , County of BOX Elder , state of				
Utah, Zip Code	94310 , Telephone Numl	ber (if any) <u>435-279</u> - 05	154 ;	
that I am a registered voter; and that I am a candidate for the office of TOWN (OWN U)				
(stating the term	n). I will meet the legal qualifications	s required of candidates for thi	s office. If filing via a	
designated agen	t, I attest that I will be out of the state of	Utah during the entire candidate	e filing period. I will file	
all campaign fin	ancial disclosure reports as required by	law and I understand that failu	re to do so will result in	
my disqualificat	ion as a candidate for this office and rem	noval of my name from the ballot	. I request that my name	
be printed upon	the applicable official ballots.			
Ken2 _ Sirens Email Address (one that is closely	sen Qyahoo.(om_ monitored)			
Candidates must	provide the filing officer with an email ad	dress at the time of filing if the car	ndidate wishes to display	
a candidate profil	le on the Statewide Electronic Voter Infor	mation website. <u>20A-9-203(4)(c)</u>	(iv)(B)	
	Myenza Mula fine Signature of	Auro di data		
MARIA CARACTER	(must be signed in the pre	sence of the filing officer)		
Subscribed and swo	(filing officer name)	on this(m	0-6-2025 nonth/day/year)	
WW CORPORT	(City or	Owell (town)	(Date Received)	

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.

Drew
FIRST NAME (as it will appear on the ballot)  MIDDLE NAME (as it will appear on the ballot)
LAST NAME (as it will appear on the ballot)
for the office of BOUVA MEMBER for the FOUV YEW (two or four-year) term for the city/town of HOVULL .
State of Utah County of Pox Elder County  I, Drew alan Sovensen , being first sworn and under
penalty of perjury, say that I reside at 15190 N 17200 W  Street, City of HOWLI , County of BOLFVALV , state of Utah, Zip Code 94314 , Telephone Number (if any) 425 779 - 04914 ; 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
all campaign financial disclosure reports as required by law and I understand that failure to do so will result in my disqualification as a candidate for this office and removal of my name from the ballot. I request that my name be printed upon the applicable official ballots.
but creek trucking hot mall. com Email Address (one that is closely monitored)
Candidates 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)(c)(iv)(B)
Signature of Candidate  (must be signed in the presence of the filing officer)
Subscribed and swore to before with the state on this 6-5-2025 OR
(filing officer name) (month/day/year)
OWN CORPORTION TOWELL 6-6

(City or town)

(Date Received)

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.

	1) 11	j	,			
EIDG	Hrthun	<u></u>				
FIRS	T NAME (as it will appear on the ballot)	MIDDLE NAN	<b>IE</b> (as it will appear on the ballot)			
	Donalas					
LAST	NAME (as it will appear on the ballot)	_				
for the	e office of Town Council	for the	(two or four-year) term			
for the	city/town of //owell					
State of County	yof Utah Yof Box Elder	ss.				
noneltr	being first sworn and under					
	alty of perjury, say that I reside at / fowell , County of Boveller, state of					
	, the state of the					
	, Zip Code Uta 84316 Telephone Number (if any) 435-279-0904; I am a registered voter; and that I am a candidate for the office of Town Colors.					
	ting the term). I will meet the legal qualifications required of candidates for this office. If filing via a					
	ignated 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 require					
	y disqualification as a candidate for this office and removal of my name from the ballot. I request that my name					
	be printed upon the applicable official ballots.					
Email A (one that	Farms 1914@ 6 mail, ddress tis closely monitored)	Com				
Candida	lidates must provide the filing officer with an email address at the time of filing if the candidate wishes to display					
a candi	didate profile on the Statewide Electronic Voter Information website. 20A-9-203(4)(c)(iv)(B)					
	Arthur L.	ouglas				
Signature of Cardidate  (must be signed in the presence of the filing officer)						
	WN CZEMINO STATE PAR					
Subscrab	ed and sworn to before (filing officer han	on this	(month/day/year)			
	City Control (City City City City City City City City	Howell ty or town)	6-4-2025 (Date Received)			

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.

Kimi	LaRay
FIRST NAME (as it will appear on the ballot)	MIDDLE NAME (as it will appear on the ballot)
Rinderknecht	
LAST NAME (as it will appear on the ballot)	Yur.
for the office of TOWN COUNCIL	for the
for the city/town of TOWL	<del>,</del>
State of Utah County of  Box Elder	ss.
I, RIMI KINGERFRICHI	, being first sworn and under
penalty of perjury, say that I reside at 14375	No. 18000W.
Street, City of TOWO!	, County of <u>BOX Elder</u> , state of
Utah, Zip Code SUBMO, Telephone Nur	
that I am a registered voter; and that I am a candida	
	ons required of candidates for this office. If filing via a
	of Utah during the entire candidate filing period. I will file
	by law and I understand that failure to do so will result in
	emoval of my name from the ballot. I request that my name
be printed upon the applicable official ballots.	
Email Address (one that is closely monitored)	
Candidates 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 Inf	formation website. 20A-9-203(4)(c)(iv)(B)
	e of Candidate presence of the filing officer)
and the p	and the same of th
Subscribed and sworre to before filing officer name  (Seal)  (City	on this <u>6-2-2025</u> (month/day/year)
(Seal) (City	or town) towell wan (Date Received) 6-2-6