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.

=	Jeanette		
	FIRST NAME (as it will appear on the ballot)	MIDDLE NAME (as it v	vill appear on the ballot)
	Atkinson		
	LAST NAME (as it will appear on the ballot)		
	for the office of <u>City Council</u>	for the 4 year	(two or four-year) term
	for the city/town of Garland.		
State of Utah County of Box Elder ss.			
			first sworn and under
	penalty of perjury, say that I reside at 493 E. 1250 S. Street, City of Garland, County of Box Elder, state of Utah, Zip Code 843/2, Telephone Number (if any) 801-814-5758; that I am a registered voter; and that I am a candidate for the office of City council 4 year term (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.		
Atkinsong@frontiernet.net 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)
Signature of Candidate (must be signed in the presence of the filing officer) Out 104 2025 CORPORATE (filing officer name) Garland City (Date Received)			
	CAL SE	arland City	(Date Received)
	William International Control of the		