

CANDIDATE FILING PERIOD (I.C. 50-410)

CITY OFFICE DECLARATION OF CANDIDACY

RECEIVED AUG 2 8 2023 9:36Am

Idaho Code 34-701(2) now requires phone numbers to be provided. Idaho Code 34-704(4) states and STATE STATES and Information in declarations of candidacy shall be made publicly available upon requirements.

OFFICE INFORMATION

Opens: August 28, 2023 (8:00 am)		Filing for the Offi	ice of:	ity Cour	101	
Closes: September 8, 2023 (5:00 pm)		City I	Name:	itar		
CANDIDATE WITHDRAWAL DEADLINES (I.C. 34-1405A)		Term length, sub-di	strict.	141		
September 22, 2023 (5:00 pm)		zone, seat or position: (if applicable)		eat 2	+2	
CANDIDATE INFORMATION		Artist Carporter			Note that the second of	
Candidate Name (As it appears on your vo	cord.)			Candidate Phone		
First Jennife	A Salmonsen			Suffix	503-830-1989	
Residence Address (As it appears on your voter registration record.)						
Street Address 1956 W Golden Rain	Sta	r	State ID	2ip Code 83669	County	
BALLOT NAME						
Write your name exactly as you would like it to appear on the ballot						
Jennifer A Salmonsen						
HOMESTEAD EXEMPTION (I.C. 34-107[2], 34-701[3])						
Have you, or your spouse, claimed a homestead exemption? □ Yes □ No						
If Yes, Please List the Address						
Street Address	City		State	Zip Code	County	
9954 W 60 Un Rain	Star		ID	83669	Ada	
CAMPAIGN FINANCE INFORMATION						
I do hereby certify that I am a registered elector of the State of Idaho and appoint myself as treasurer for my campaign. If any campaign finance contributions or expenditures reach or exceed \$500, I will create a Campaign Finance account with the Secretary of State, and may at that time, appoint another person as Treasurer or remain as my own Treasurer.						
CERTIFICATION						
I, the undersigned, being a resident of t above to be voted on at the Election to be held on true and accurate.						
I further certify that I possess the legal on nominating petition containing the five (5) signature.	qualifications to hold res of qualified elect	I said office. I submit herev lors as statutorily required.	vith the filing f	ee of (\$40.00), or in	lieu of the filing fee the	
Dated: 8/28/2523 Candidate Signature:						
Subscribed and sworn to before me this 2	8th day of Au	GUST 202	23	7		
Signature: Karbeller	Herd			server De De	en Harring	
Notary Public in and for the State of Idaho, re	esiding at			A AM. No.	20/83 00 4	
ADA-COUNTY		 -		TONE	IRY'S	
My Commission Expires:	2024			PUB.	LIC No re	
EC-3A - Declaration of Candidacy for City Offices – Approv	ved by the Idaho Secre	stary of State		Male O	Revised 04/11/2023	



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Opens: August 28, 2023 (8:00 am)	Filling for the Office of: City Councy/
Closes: September 8, 2023 (5:00 pm)	City Name: S-far
CANDIDATE WITHDRAWAL DEADLINES (I.C. 34-1405A)	Term length, sub-district, zone, seat or position:
September 22, 2023 (5:00 pm)	(if applicable) Star Z
CANDIDATE INFORMATION	
Candidate Name (As it will appear on the ballot.)	
Jennifer A Salmonsen	
This petition must be filed in the office of the appropriate the last day of filing for the Election at which you are of	iate city clerk with the Declaration of Candidacy on or before 5:00 p.m. of desiring to participate in. The submitted petition must have affixed theret
the names of at least five (5) qualified electors which	reside within the city.
SIGNERS STATEMENT	
opposite my name, and that I join in the petition of the candidate for	ed above in the State of Idaho, do hereby certify and declare that I reside at the place set the office listed above, to be voted for at the election to be held on the
Signature of Petitioner Printed Name	Residence Address Date Signed
1. Kein Rufe- Kern Nielsen He	633 W. Creekrapids Dr Star, 10 83669 15 Aug. 202
2. TABALA. CHOONE	9705 w. compton of STAR ID 83669 8/15/23
3. LACH HESSEN	6 10579 W. POYAL FERN CT 83669 8/15/202
4. Cost Rick Salmonser	9956 W Gistder Ram 83069 8/15/83
SVE SPER	6205-STREAMLEAF STIDR JD 83669 8/16/23
6. Muchael Wichael Wikeyes	338 3. Long Bay Way Star, 1083669 8/18/23
" Unistal Hurst Crystal Hurst	9982 W Golden Rainst Star, 10 83669 8/27/2
CERTIFICATION	
State of Idaho	
I, Jan L. Salwhn Screening first duly sworn say: person who signed this sheet of the foregoing petition signed his or hand residence correctly, that each signer is a qualified elector of the S	That I am a resident of the State of Idaho and at least eighteen (18) years of age: that evener name thereto in my presence: I believe that each has stated his or her name address State of Idaho, and a resident of the county of
Circulator Signature:	Address: 9951 W Golden Rain Sta-ID 8366
Subscribed and sworn to before me this 28 th day of Au	
Notary Signature: Kachel Dee Hour	Jennes Den Harra
Notary Public in and for the State of Idaho, residing at	No. 2018
ADA COUNTY	O NOTARY .
My Commission Expires: 11/19/2024	PUBLIC
	A STATE OF Identified