

# 2021 MUNICIPAL DECLARATION OF CANDIDACY

RECEIVED

BY OC DATE 6/7/21

of

Hal Johnson  
(print name exactly as it is to be printed on the official ballot - no amendments or modifications after 5:00 p.m. on June 7, 2021)

for the office of Mayor for the Four (two or four-year) term  
for the city/town of Kanab

State of Utah }  
County of Kane } ss.

I, Hal Johnson, being first sworn and under penalty of perjury, say that I reside at 5985 Hillside Dr Street, City of Kanab, County of Kane, state of Utah, Zip Code 84741, Telephone Number (if any) 801 404 6255; that I am a registered voter; and that I am a candidate for the office of Mayor (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.

(Optional) I wish to classify my addresses listed above as a protected record. By doing so, you must provide an alternative address or phone number.

Alternative Address OR Phone Number: \_\_\_\_\_

haljohnson747@gmail.com  
Email Address

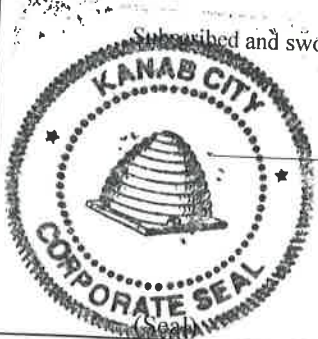
Website \_\_\_\_\_

Hal Johnson  
Signature of Candidate

(Must be notarized or be signed in the presence of the filing officer. A designated agent may not sign on behalf of the candidate.)

Subscribed and sworn to (or affirmed) before me by Celeste Cram on this 6/7/21 (month/day/year)

Celeste Cram  
Notary Public (Clerk or other officer qualified to administer oath)



(City or town)

(Date Received)

RECEIVED  
CC DATE 6/7/21

# 2021 MUNICIPAL DECLARATION OF CANDIDACY

of

Troy (Colten) Johnson  
(print name exactly as it is to be printed on the official ballot - no amendments or modifications after 5:00 p.m. on June 7, 2021)

for the office of Mayor for the 4 (two or four-year) term  
for the city/town of Kanab

State of Utah }  
County of Kane } ss.

I, Colten Johnson, being first sworn, say that I reside  
at 74 W. 200 N. Street,  
City of Kanab, County of Kane, state of Utah,  
Zip Code 84741, Telephone Number (if any) 435-899-1302; that I  
am a registered voter; and that I am a candidate for the office of Mayor (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.

(Optional) I wish to classify my addresses listed above as a protected record. By doing so, you must provide an  
alternative address or phone number.

Alternative Address OR Phone Number: \_\_\_\_\_

johnsonc@kane.k12.ut.us  
Email Address

Website

Colten Johnson  
Signature of Candidate

(Must be notarized or be signed in the presence of the filing officer. A designated agent may not sign on behalf of the candidate.)

and sworn to (or affirmed) before me by Celeste Cram on this 6/7/21  
(month/day/year)

Celeste Cram  
Notary Public (Clerk or other officer qualified to administer oath)



(Seal)

Kanab City

(Date Received)

RECEIVED  
11 CC DATE 6/7/21

# 2021 MUNICIPAL DECLARATION OF CANDIDACY

of

Christopher Franklin

(print name exactly as it is to be printed on the official ballot – no amendments or modifications after 5:00 p.m. on June 7, 2021)

for the office of Mayor for the Four (two or four-year) term

for the city/town of Kanab

State of Utah Kane } ss.  
County of Kane

I, Christophe Franklin, being first sworn, say that I reside at 872 W Aspen Dr Street, City of Kanab, County of Kane, state of Utah, Zip Code 84741, Telephone Number (if any) 435-383-7294; that I am a registered voter; and that I am a candidate for the office of Mayor (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.

(Optional) I wish to classify my addresses listed above as a protected record. By doing so, you must provide an alternative address or phone number.

Alternative Address OR Phone Number: P.O. Box 55 Glendale, UT 84729

c.franklin78@yahoo.com  
Email Address

N/A  
Website

Chris Franklin

Signature of Candidate

(Must be notarized or be signed in the presence of the filing officer. A designated agent may not sign on behalf of the candidate.)

Subscribed and sworn to (or affirmed) before me by Celeste Cram on this 6/7/2021 (month/day/year)

Celeste Cram  
Notary Public (Clerk or other officer qualified to administer oath)



(Seal)

Kanab City

(Date Received)

# 2021 MUNICIPAL DECLARATION OF CANDIDACY

RECEIVED  
BY CC DATE 6/7/21

of

Sindi Vetere

(print name exactly as it is to be printed on the official ballot – no amendments or modifications after 5:00 p.m. on June 7, 2021)

for the office of Mayor for the 4 (two or four-year) term

for the city/town of Kanab City

State of Utah }  
County of Kane } ss.

I, Sindi Vetere, being first sworn and under penalty of perjury, say that I reside at 510 North 100 West Street, City of Kanab, County of Kane, state of Utah, Zip Code 84741, Telephone Number (if any) 435-899-1265; that I am a registered voter; and that I am a candidate for the office of Mayor 4 year (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.

(Optional) I wish to classify my addresses listed above as a protected record. By doing so, you must provide an alternative address or phone number.

Alternative Address OR Phone Number: \_\_\_\_\_

Sagexa@kanab.net  
Email Address

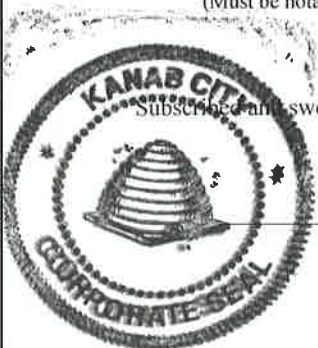
Website

Sindi Vetere  
Signature of Candidate

(Must be notarized or be signed in the presence of the filing officer. A designated agent may not sign on behalf of the candidate.)

Subscribed and sworn to (or affirmed) before me by Celeste Cram on this 6/7/2021  
(month/day/year)

Celeste Cram  
Notary Public (Clerk or other officer qualified to administer oath)



(Seal)

(City or town)

(Date Received)

RECEIVED  
BY [signature] DATE 6/1/21

# 2021 MUNICIPAL DECLARATION OF CANDIDACY

of

Jeff Yates

(print name exactly as it is to be printed on the official ballot – no amendments or modifications after 5:00 p.m. on June 7, 2021)

for the office of Mayor for the Four (two or four-year) term

for the city/town of Kanab

State of Utah }  
County of KANE } ss.

I, Jeff Yates, being first sworn and under penalty of perjury, say that I reside at 247 E 450 W Street, City of Kanab, County of Kane, state of Utah, Zip Code 84741, Telephone Number (if any) 435-616-2789; that I am a registered voter; and that I am a candidate for the office of Mayor

(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.

(Optional) I wish to classify my addresses listed above as a protected record. By doing so, you must provide an alternative address or phone number.

Alternative Address OR Phone Number: \_\_\_\_\_

yate171@gmail.com Email Address \_\_\_\_\_ Website

[Signature]

Signature of Candidate

(Must be notarized or be signed in the presence of the filing officer. A designated agent may not sign on behalf of the candidate.)

Subscribed and sworn to (or affirmed) before me by Joe Decker on this June 1, 2021 (month/day/year)



Notary Public (Clerk or other officer qualified to administer oath)

KANAB  
(City or town)

6/1/21  
(Date Received)

RECEIVED  
BY CE DATE 6/7/21

# 2021 MUNICIPAL DECLARATION OF CANDIDACY

of

April Crofts  
(print name exactly as it is to be printed on the official ballot – no amendments or modifications after 5:00 p.m. on June 7, 2021)

for the office of City Council for the four-year (two or four-year) term  
for the city/town of Kanab.

State of Utah }  
County of \_\_\_\_\_ } ss.

I, April Crofts, being first sworn, say that I reside  
at 329 N. 300 W. Street,  
City of Kanab, County of Kane, state of Utah,  
Zip Code 84741, Telephone Number (if any) 435-2689-0060; that I  
am a registered voter; and that I am a candidate for the office of City Council (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.

(Optional) I wish to classify my addresses listed above as a protected record. By doing so, you must provide an  
alternative address or phone number.

Alternative Address OR Phone Number: \_\_\_\_\_

CroftsApril76@gmail.com  
Email Address

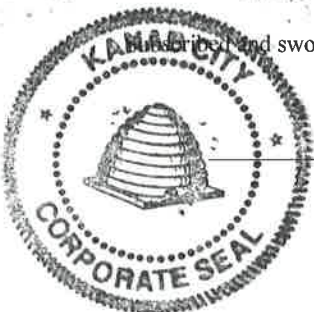
Website

April Crofts  
Signature of Candidate

(Must be notarized or be signed in the presence of the filing officer. A designated agent may not sign on behalf of the candidate.)

and sworn to (or affirmed) before me by Celeste Cram on this 6/7/2021  
(month/day/year)

Celeste Cram  
Notary Public (Clerk or other officer qualified to administer oath)



(Seal)

Kanab City

(Date Received)

# 2021 MUNICIPAL DECLARATION OF CANDIDACY

RECEIVED  
CC  
DATE 6/3/21

of

Judy Woolley

(print name exactly as it is to be printed on the official ballot – no amendments or modifications after 5:00 p.m. on June 7, 2021)

for the office of City Council for the 4-year (two or four-year) term  
for the city/town of Kanab

State of Utah }  
County of Kane } ss.

I, Judith A. Woolley, being first sworn and under penalty of perjury, say that I reside at 965 W. Willow Drive  
Street, City of Kanab, County of Kane, state of Utah, Zip Code 84741, Telephone Number (if any) 406 360 4790; that I am a registered voter; and that I am a candidate for the office of City Council (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.

(Optional) I wish to classify my addresses listed above as a protected record. By doing so, you must provide an alternative address or phone number.

Alternative Address OR Phone Number: \_\_\_\_\_

wildawoolleymt@gmail.com  
Email Address

Website

JAWoolley

Signature of Candidate

(Must be notarized or be signed in the presence of the filing officer. A designated agent may not sign on behalf of the candidate.)

Subscribed and sworn to (or affirmed) before me by

Celeste Cram  
Celeste Cram

on this

6/3/2021  
(month/day/year)

Celeste Cram  
Notary Public (Clerk or other officer qualified to administer oath)



(Seal)

Kanab  
(City or town)

6/3/2021  
(Date Received)

# 2021 MUNICIPAL DECLARATION OF CANDIDACY

RECEIVED  
BY CC DATE 6/4/21

of

Chris Heaton

(print name exactly as it is to be printed on the official ballot – no amendments or modifications after 5:00 p.m. on June 7, 2021)

for the office of City Council for the Four-Year (two or four-year) term  
for the city/town of Kanab.

State of Utah }  
County of Kane } ss.

I, Chris Heaton, being first sworn and under penalty of perjury, say that I reside at 240 East Plum Tree Dr Street, City of Kanab, County of Kane, state of Utah, Zip Code 84741, Telephone Number (if any) 435-899-0927; that I am a registered voter; and that I am a candidate for the office of City Council (4 Year) (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.

(Optional) I wish to classify my addresses listed above as a protected record. By doing so, you must provide an alternative address or phone number.

Alternative Address OR Phone Number: \_\_\_\_\_

chrishcat3@gmail.com  
Email Address

Website

[Signature]

Signature of Candidate

(Must be notarized or be signed in the presence of the filing officer. A designated agent may not sign on behalf of the candidate.)

Subscribed and sworn to (or affirmed) before me by Celeste Cram on this 6/4/2021  
(month/day/year)

[Signature]  
Notary Public (Clerk or other officer qualified to administer oath)



(Seal)

(City or town)

(Date Received)



RECEIVED  
DATE 6/3/21

# 2021 MUNICIPAL DECLARATION OF CANDIDACY

of

SCOTT COLSON

(print name exactly as it is to be printed on the official ballot – no amendments or modifications after 5:00 p.m. on June 7, 2021)

for the office of COUNCIL for the FOUR (two or four-year) term

for the city/town of KANAB

State of Utah }  
County of KANE } ss.

I, GEORGE SCOTT COLSON III, being first sworn and under penalty of perjury, say that I reside at \_\_\_\_\_ Street, City of KANAB, County of KANE, state of Utah, Zip Code 84741, Telephone Number (if any) (435)689-2276; that I am a registered voter; and that I am a candidate for the office of COUNCIL

(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.

(Optional) I wish to classify my addresses listed above as a protected record. By doing so, you must provide an alternative address or phone number.

Alternative Address OR Phone Number: (435)689-2276

colson.scott@YAHOO.com

Email Address

Website

George S. Colson III

Signature of Candidate

(Must be notarized or be signed in the presence of the filing officer. A designated agent may not sign on behalf of the candidate.)

Subscribed and sworn to (or affirmed) before me by Joe Decker on this 6/3/21 (month/day/year)

[Signature]  
Notary Public (Clerk or other officer qualified to administer oath)

(Seal)

(City or town)

(Date Received)