



QUALIFICATIONS FOR CANDIDATE FILING DECLARATION

UCA §20A-9-201

Please Initial

The constitutional and statutory requirements were read to me and I meet those qualifications.

I understand an individual who holds a municipal office may not, at the same time, hold a county elected office.

I understand my name will appear on the ballot exactly as it is printed on the declaration of candidacy and I may not make any amendments or modifications after 5:00pm on June 6, 2025.

I agree to file all campaign financial disclosures accurately and on time, and I understand that failure to do so will result in my disqualification as a candidate and removal from the ballot, and may subject me to possible fines and/or criminal penalties.

I have received a copy of the pledge of fair campaign practices and understand signing this pledge is voluntary.

I provided a valid email, or physical address if no email is available, and I understand this will be used for official communications and updates from election officials.

I understand I will receive all financial disclosure notices by email.

I prefer to also receive financial disclosure notices by mail at the following address:

I have received information regarding submitting a candidate profile to the Statewide Electronic Voter Information Website Program (Utah Code section 20A-7-801) and its applicable deadline.

I have completed and/or updated my conflict-of-interest disclosure statement.

I understand that I can withdraw my candidacy at any time by filing a written affidavit with the City Recorder. I understand that if I withdraw within 64 days of Election Day, my name may still appear on the ballot but any votes cast for me will not be counted.

I have paid the filing fee of \$25.00 and understand this filing fee is non-refundable unless it is determined that I am not qualified to be a candidate or I have improperly filed an Affidavit for Impetuosity as according to Utah Code section 20A-9-201.

Candidate Signature:

Tracy Martinez

(MUST be signed in the presence of the filing officer)

Date: 6-6-2025

Filing Officer Signature:

J. J.

(City Recorder or other officer qualified to administer oath)

Date: 6-6-2025



Harrisville City 2025 Municipal Election
DECLARATION OF CANDIDACY

Candidate Name:

Tracy Martinez

(print name EXACTLY as it will appear on the ballot)

Office Declaring: Mayor

City Council

Term: 4-year

for Harrisville City located in Weber County in the state of Utah.

PUBLIC CONTACT INFORMATION

(must provide at least one of the following)

Home Address:

352 W 1925 N Harrisville Ut 84414

Mailing Address:

Phone:

(801) 388-6701

Email (optional):

Website (optional):

MUNICIPAL CANDIDATE REQUIREMENTS

Utah Code §10-3-301 & Utah Code §20A-9-203 state the individual declaring candidacy is a registered voter and meets the following requirements:

- Registered voter in the municipality in which the individual is elected*
- Must have resided within the municipality for which the candidate is seeking office for the 12 consecutive months immediately before the date of the election.
- If the individual resides in a territory which was annexed into the municipality: must have resided within the annexed territory or the municipality the 12 consecutive months immediately before the date of the election.
- Pay filing fee, if one is required by municipal ordinance
- Not convicted of a felony, treason, or crime relating to elections**
- Cannot have been declared mentally incompetent

I do solemnly swear, under penalty of perjury, that I have read and meet the constitutional and statutory requirements to become a candidate and I will not knowingly violate any law governing campaigns and elections.

Candidate Signature:

Tracy Martinez

Date:

6-6-2025

(MUST be subscribed and sworn to, or affirmed, in the presence of the filing officer)

Filing Officer Signature:

Joe J.

Date:

6-6-2025

(City Recorder or other officer qualified to administer oath)



Harrisville City 2025 Municipal Election
DECLARATION OF CANDIDACY AFFIDAVIT

"I, (print name) Tracy Martinez,

being first sworn and under penalty of perjury, say that I reside at

352 W 1925 N,

City of Harrisville, County of Weber, state of Utah, Zip Code
84414, Telephone Number (if any) 801-388-6701 ; 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.

Tracy Martinez
(Signed by candidate)

STATE OF UTAH }

}

ss.

County of Weber }

Subscribed and sworn to (or affirmed) before me this 6 day of
June, 2025 (month\year).

Jack Fogal
(Signed by Notary Public)

63-27-2027

(My commission expires)





CONFLICT OF INTEREST DISCLOSURE STATEMENT

Under the Municipal Officers' and Employees' Ethics Act
(Utah Code Annotate Sections 10-3-1313, 20A-11-1640(6), and 10-3-301.5)

Candidate/Officeholder:

Tracy Martinez

Mayor

City Council

Candidate for Office

1. The name and address of each current employer during the preceding year including a brief description of employment, occupation, and job title.

- Current Employer(s):

○ Employer Name: _____

○ Employer Address: _____

○ Job Title: _____

○ Occupation: _____

○ Brief Description: I'm retired

- Previous Employer(s):

○ Employer Name: IRS

○ Employer Address: 2262 Wall Ave Ogden UT 84414

○ Job Title: CSR

○ Occupation: Customer Service Rep (International)

○ Brief Description: Student Visa Refunds and

Business forms

2. The name of any entity* in which the individual is an owner or officer or was an owner or officer during the preceding year including a brief description of the type of business or activity conducted by the entity and position.

Check box if non-applicable

○ Entity Name: _____

○ Brief Description: _____



3. The name of each individual from whom, or entity from which, the regulated officeholder/candidate has received \$5,000 or more in income during the preceding year including a brief description of the type of business or activity.

Check box if non-applicable

o Individual Name: _____

o Brief Description: _____

4. The name and description of each entity in which the regulated officeholder/candidate holds any stocks or bonds having a fair market value of \$5,000 or more as of the date of the disclosure form or during the preceding year (excluding funds that are managed by a third party, including blind trusts, managed investment accounts, and mutual funds).

Check box if non-applicable

o Entity Name: _____

o Brief Description: _____

5. The name of each entity or organization not described in Items 2A through 4B of this form in which the regulated officeholder/candidate currently serves, or served in the preceding year, in a paid leadership capacity or in a paid or unpaid position on a board of directors including a brief description of the business or activity and position held.

Check box if non-applicable

o Entity Name: _____

o Position Held: _____

o Brief Description: _____



6. (Optional): Description of any real property in which the regulated officeholder/candidate holds an ownership or other financial interest that the regulated officeholder/candidate believes may constitute a conflict of interest including a description of the type of interest.

Check box if non-applicable

Real Property: _____

Type of Interest: _____

7. The name(s) of the regulated officeholder/candidate's spouse including the name and address of current and preceding year employer if the regulated officeholder/candidate believes the employment may constitute a conflict of interest.

Check box if non-applicable

Name of Spouse: _____

• Current Employer(s):

Employer Name: _____

Employer Address: _____

Job Title: _____

Occupation: _____

Brief Description: _____

• Previous Employer(s):

Employer Name: _____

Employer Address: _____

Job Title: _____

Occupation: _____

Brief Description: _____



8. The name of any other adult residing in the regulated officeholder/candidate's household who is not related by blood, including a brief description of their employment or occupation if the regulated officeholder/candidate believes the employment may constitute a conflict of interest.

Check box if non-applicable

○ Other Adult Name: _____

○ Brief Description: _____

○ Other Adult Name: _____

○ Brief Description: _____

9. (Optional): A description of any other matter or interest that the regulated officeholder/candidate believes may constitute a conflict of interest.

Check box if non-applicable

Check if applicable:

Under UCA 20A-11-1604(7)(a), I claim that *I am an at-risk government employee* as defined in UCA 63G-2-303(1)(a) and that my employment under Item 1 be redacted.

Under UCA 20A-11-1604(7)(a), I claim that *my spouse is an at-risk government employee* as defined in UCA 63G-2-303(1)(a) and that my spouse's employment under Item 7 be redacted.

I, the regulated officeholder/candidate, believe the information provided is true and accurate to the best of my knowledge.

Tracy Martinez

Individual Signature

6.6.2025

Date

Privacy Notice

- The personal data collected in this form will be available to the public under 63G-2-301.
- Any personal data redacted in accordance with 20A-11-1604(7)(a) is not considered a public record under 63G-2-301. This data will be used for administrative purposes and will not be displayed to the public. This information is required under 20A-11-1604. Violation of this section may result in a class B misdemeanor and a \$100 fine. The information, unless specified, will be publicly available on the disclosures and possibly other election-related websites. Personal data collected on the website will not be sold. The personal data will be included in the record series GRS 1911.