



## 2026 Declaration of Candidacy County Offices

Information entered on this form is a public record under Utah Code § 63G-2. This form will be posted online.

**\*PRINT YOUR NAME EXACTLY AS YOU WOULD LIKE IT TO APPEAR ON THE BALLOT**

Gail

CANDIDATE FIRST, MIDDLE, and/or NICKNAME(S) in desired order

Koske

LEGAL LAST NAME

\*If the name proposed for the ballot does not consist only of a candidate's legal first and legal last names, a *Name Affidavit* must also be submitted.

Candidates may provide their address, phone number, and email address on a **confidential contact form**.

County  
Commission A

OFFICE and DISTRICT

Democrat

POLITICAL PARTY you are a member of

Koskegail@gmail.com

EMAIL ADDRESS

764 S 320 E

RESIDENTIAL or MAILING ADDRESS

Irving

CITY

UT

STATE

84738

ZIP CODE

760 920 0809

PHONE NUMBER

**HOW ARE YOU SEEKING NOMINATION?** (select one) **HOW WILL YOU GATHER SIGNATURES?** (if applicable)

☒ Only the convention process.

☐ Only the manual process.

☐ Only the signature-gathering process.

☐ Only the electronic process.

☐ Both the convention and signature-gathering processes.

☐ Both the manual and electronic processes.

**Stop! The following section must be completed in the presence of the filing officer or notary public.**

I, the candidate listed above, declare my candidacy for the office listed above, seeking the nomination of the political party of which I am a member. I do solemnly swear, under penalty of perjury, that:

- I will meet the qualifications to hold the office, both legally and constitutionally, if selected;
- I will not knowingly violate any law governing campaigns and elections;
- If filing via a designated agent, 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.

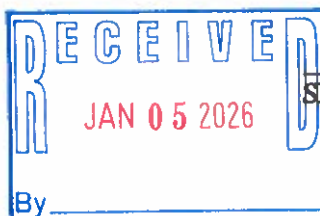
The address that I designate for receiving official election notices is the address listed above or on the confidential contact form.

SIGNATURE OF CANDIDATE (must be signed in the presence of the filing officer or notary public)

Subscribed and sworn to before me  
this

1.5.2026  
MONTH/DAY/YEAR

Catherine Doyle  
PRINTED NAME OF FILING OFFICER or Notary Public



Catherine Doyle  
SIGNATURE OF FILING OFFICER or Notary Public



## 2026 Declaration of Candidacy County Offices

### PLEASE INITIAL THE FOLLOWING

- JK The filing officer read the constitutional and statutory qualifications listed above to me, and I meet those qualifications.
- JK I agree to file all required campaign financial disclosure reports, and I understand that failure to do so may result in my disqualification as a candidate for this office, removal of my name from the ballot, possible fines, and criminal penalties.
- JK I received a copy of the pledge of fair campaign practices, and I understand that signing this pledge is voluntary.
- JK I received a copy of Utah Code § 20A-7-801 regarding the Statewide Electronic Voter Information Website Program and its applicable deadline.
- JK I provided an actively monitored email address to the filing officer. I understand this email address will be used for official communications and updates from election officials and is not a record under Utah Code § 63G-2.
- JK I submitted signed affidavits, as required, to have my name appear on the ballot as specified on this declaration of candidacy.
- JK I understand any information entered on this form is a public record under Utah Code § 63G-2 and will be made available to the public. I understand a confidential contact information form is available.
- JK I understand that I may not make any amendments or modifications to my candidate filing after 5:00 p.m. on the final day of the filing period.

SIGNATURE OF CANDIDATE

DATE

SIGNATURE OF FILING OFFICER or Notary Public

DATE



# Conflict of Interest Disclosure

For each person seeking to become a candidate for a county office or local school board, a conflict of interest disclosure statement shall be filed with the declaration of candidacy. Declaration of candidacy applications may not be accepted without a complete conflict of interest disclosure statement (UCA 17-70-304). Responses listed below are per UCA 20A-11-1604(6). Attach additional sheets as necessary if there are more than one applicable answers, list all that apply; attach additional sheets as necessary.

Candidate Name: Gail Koske Election Position: County Commissioner "A"

Are you *currently* employed? ☐ YES ☒ NO

If yes: Name of Current Employer NA

Address of Current Employer \_\_\_\_\_

Current Employment Job Title/Occupation \_\_\_\_\_

Current Employment Job Duties \_\_\_\_\_

Were you employed in the *previous year*? ☐ YES ☒ NO

If different than your current employer:

Preceding Year Employer NA

Preceding Year Employer Address \_\_\_\_\_

Preceding Year Employment Job Title/Occupation \_\_\_\_\_

Preceding Year Employment Job Duties \_\_\_\_\_

Are you *currently* an owner or officer of an entity? ☒ YES ☐ NO

If yes: Name of the entity Reading Remedy LLC ADB Legal Remedy

Position/Title of officeholder in entity owner

Brief description of the type of business or activity conducted by the entity

Reading Repair, Legal paperwork

Were you an owner or officer of an entity in the *previous year*? ☒ YES ☐ NO

If different than current year:

Name of the entity \_\_\_\_\_

Position/Title of officeholder in entity \_\_\_\_\_

Brief description of the type of business or activity conducted by the entity

\_\_\_\_\_  
\_\_\_\_\_

Have you received \$5,000 or more in income from an individual or entity during the preceding year?

☐ YES ☒ NO If yes: Individual/Entity Name \_\_\_\_\_

Brief description of the type of business or activity conducted by the individual or entity

Do you hold 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 any fund that is managed by a third party including a mutual fund, managed investment account, and blind trusts)?

☒ YES ☐ NO If yes: Individual/Entity Name Minnesota Mutual

Brief description of the type of business or activity conducted by the entity

Retirement fund

Do you currently serve, or did you serve in the prior year, in a paid leadership capacity or in a paid or unpaid position on a board of directors?

☐ YES ☒ NO If yes: Individual/Entity Name \_\_\_\_\_

Type of position held by the regulated officeholder \_\_\_\_\_

Brief description of the type of business or activity conducted by the entity

Please describe any real property you hold an ownership or other financial interest in that you believe may constitute a conflict of interest, including a description of the type of interest held. (OPTIONAL)

My home: 7645320 E, Jans Utah 84738

Name of Regulated Officeholder's Spouse: NA

The following questions pertain to the officeholder's spouse. If the officeholder's spouse is an at-risk government employee meeting the requirements of 20A-11-1604(7), the filing officer can redact the following information. Does the filing officer need to redact information per 20A-11-1604(7)? ☐ YES ☒ NO

Is your spouse *currently* employed? ☐ YES ☐ NO

If yes: Name of Current Employer NA

Address of Current Employer \_\_\_\_\_

Current Employment Job Title/Occupation \_\_\_\_\_

Current Employment Job Duties \_\_\_\_\_

Was your spouse employed in the *previous year*? ☐ YES ☐ NO

If different than your current employer:

Preceding Year Employer NA

Preceding Year Employer Address \_\_\_\_\_

Preceding Year Employment Job Title/Occupation \_\_\_\_\_

Preceding Year Employment Job Duties \_\_\_\_\_

Are there other adults residing in the candidate's household who are not related by blood or marriage?

☐ YES ☒ NO

If yes: Other Adult Name(s): \_\_\_\_\_

If the officeholder believes a conflict exists or may exist because of another adult's residence in the officeholder's household, then provide a brief description of the adult's employment or occupation as well as any other matter or interest that may constitute a conflict of interest:

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A description of any other matter or interest that the regulated officeholder believes may constitute a conflict of interest (OPTIONAL)

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By my signature below, I hereby certify, that the foregoing information is a true and accurate disclosure of the conflict or potential conflict of interest with Washington County to the best of my knowledge.

Signature:  Date: Jan 6, 2024

Washington County is a governmental entity that is subject to the Government Records Access Management Act (GRAMA). Information you provide on an application or form may be subject to GRAMA and available to the public if required by law. If information on the document is classified as private, protected, or controlled, it may be redacted. For more information regarding Washington County's privacy policy, scan the QR code.







## 2026 Declaration of Candidacy Pledge of Fair Campaign Practices (OPTIONAL)

Information entered on this form is a **public record** under Utah Code § 63G-2. This form will be posted on [vote.utah.gov](http://vote.utah.gov). This is a **voluntary** pledge. Candidates are not required to sign this pledge to file a declaration of candidacy.

There are basic principles of decency, honesty, and fair play which every candidate for public office in the State of Utah has a moral obligation to observe and uphold, in order that, after vigorously contested but fairly conducted campaigns, our citizens may exercise their right to a free election, and that the will of the people may be fully and clearly expressed on the issues.

### THEREFORE:

**I SHALL** conduct my campaign openly and publicly, discussing the issues as I see them, presenting my record and policies with sincerity and frankness, and criticizing, without fear or favor, the record and policies of my opponents that I believe merit criticism.

**I SHALL NOT** use, nor shall I permit the use of, scurrilous attacks on any candidate or the candidate's immediate family. I shall not participate in, nor shall I permit the use of, defamation, libel, or slander against any candidate or the candidate's immediate family. I shall not participate in, nor shall I permit the use of, any other criticism of any candidate or the candidate's immediate family that I do not believe to be truthful, provable, and relevant to my campaign.

**I SHALL NOT** use, nor shall I permit the use of, any practice that tends to corrupt or undermine our American system of free elections, or that hinders or prevents the free expression of the will of the voters, including practices intended to hinder or prevent any eligible person from registering to vote or voting.

**I SHALL NOT** coerce election help or campaign contributions for myself or for any other candidate from my employees or volunteers.

**I SHALL** immediately and publicly repudiate support deriving from any individual or group which resorts, on behalf of my candidacy or in opposition to that of an opponent, to methods in violation of the letter or spirit of this pledge. I shall accept responsibility to take firm action against any subordinate who violates any provision of this pledge or the laws governing elections.

**I SHALL** defend and uphold the right of every qualified American voter to full and equal participation in the electoral process.

I, the undersigned candidate for election to public office in the State of Utah, hereby voluntarily endorse, subscribe to, and solemnly pledge myself to conduct my campaign in accordance with the above principles and practices.

Gail Koske  
NAME OF CANDIDATE

County Commissioner "A"  
OFFICE and DISTRICT

Gail Koske  
SIGNATURE OF CANDIDATE

1.5.2026  
DATE