

2026 MAGNA WATER DISTRICT 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-2-210.

DOYLE

FIRST NAME (as it will appear on the ballot)

MIDDLE NAME (as it will appear on the ballot)

JENKINS

LAST NAME (as it will appear on the ballot)

for the office of TRUSTEE for the FOUR (two or four-
year) term for the MAGNA WATER DISTRICT

State of Utah

County of: SALT LAKE } ss.

I, M. DOYLE JENKINS, being first duly sworn, say that I
reside at 7465 WEST 3500 SOUTH (Street), City of MAGNA, County of
SALT LAKE, state of Utah, 84044 (Zip Code), 801-556-0093 (Telephone Number, if any);
that I meet the qualifications for the office of board of trustees member for
MAGNA WATER DISTRICT (state the name of the special district); that I am a candidate for that
office to be voted upon at the next election; and that, if filing via a designated agent, I will be out of the state of
Utah during the entire candidate filing period, and I hereby request that my name be printed upon the official
ballot for that election.

JENKINSKATTHY24@GMAIL.COM

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]

Signature of Candidate
(must be signed in the presence of the filing officer)

Subscribed and sworn to before

Amanda J Whitmore

on this

6/8/2026

(filing officer name)

(month/day/year)



Magna Water District
(Special district)

6/8/2026

(Date Received)

This form uses tables. Please add as many additional rows as necessary for each item.

Date This Form was Completed	6-8-2026
Name of Candidate	DOYLE JENKINS

Section 1: Employment

You must disclose all current employers as well as any employers during the preceding year.

Current Employer	Address	Occupation/Job Title
		RETIRED

Non-current Employers from Preceding Year	Address	Occupation/Job Title
		N/A

Section 2: Entities in which you are an owner or officer

You must disclose all current entities as well as any entities during the preceding year.

Name of Entity (Current)	Type of business or activity conducted by the entity	Your position in the entity
		N/A

Non-current Entities from preceding year	Type of business or activity conducted by the entity	Your position in the entity
		N/A

Section 3: Income Sources

You must disclose each individual or entity from whom you have received \$5,000 or more in income currently and during the preceding year.

If you provide goods or services to multiple customers or clients as part of a business or a licensed profession, you are only required to provide this information in relation to the entity or practice through which the regulated officeholder provides the goods or services and you are not required to provide the information in relation to individual customers or clients.

Name of Individual or Entity	Type of business or activity conducted by the individual or entity
	N/A

Section 4: Investments

You must disclose each entity in which you hold any stocks or bonds having a fair market value of \$5,000 or more as of the date of disclosure or during the preceding year but excluding funds that are managed by a third party, including blind trusts, managed investment accounts, and mutual funds.

Name of Entity (Current)	Type of business or activity conducted by the entity
	N/A

Non-current Entities from Preceding Year	Type of business or activity conducted by the entity
	N/A

Section 5: Leadership Roles

You must disclose each entity in which you currently serve, or served in the preceding year, in a paid leadership capacity or in a paid or unpaid position on a board of directors. Do not include entities that you already included in Sections 2, 3 or 4.

Name of Entity (Current)	Type of business or activity conducted by the entity	Your position in the entity
		N/A

Non-current Entities from Preceding Year	Type of business or activity conducted by the entity	Your position in the entity
		N/A

Section 6: Real Property (Optional)

You may disclose a real property that you hold an ownership or other financial interest that you believe may constitute a conflict of interest.

Property Details	Type of Interest Held
	N/A

Section 7: Spouse

You must disclose the name of your spouse as well as all current employers as well as any employers during the preceding year.

Name of Spouse
KATHY JENKINS

Current Employer of Spouse	Address	Occupation/Job Title
		RETIRED

Non-current Employers of Spouse from Preceding Year	Address	Occupation/Job Title
		N/A

Section 8: Other Adult Household Members

You must disclose the name of any adult in your household who is not related by blood or marriage as well as all current employers and occupations. Please copy and paste these tables if you need to disclose more than one individual.

Name of Individual	
	N/A

Current Employer of Individual	Address	Occupation/Job Title
		N/A

Section 9: Additional Disclosures (Optional)

You may disclose any other matter or interest that you believe may constitute a conflict of interest.

Description	
	N/A

I certify that I believe this form to be true and accurate to the best of my knowledge.



 Signature of Candidate