



CERTIFICATION OF CANDIDATE FILING CITY OFFICE

Filing Dates and Deadlines

Candidates must submit a complete declaration of candidacy plus the petitions by 5:00 pm (local time) on the last day of the candidate filing period. (§34-1404, Idaho Code)

All deadlines are at 5:00 pm (local time).

NOTE: The candidate filing dates have recently been updated following the passage of House Bill 278. This form reflects the updated candidate filing deadlines.

Candidate Filing Period

August 18-29, 2025

Withdrawal Deadline

September 5, 2025

The Clerk of the City must notify the county within 24 hours of a filing. (§34-1404, Idaho Code)

Instructions for Certification

Upon receipt of both the Declaration of Candidacy and the Petition of Candidacy:

1. **Verify** the qualifications of the Candidate.
 - a. Some offices include **age requirements**. Age requirements must also be verified at the time of filing.
2. **Verify** that the Petition of Candidacy is signed by not less than 5 electors and has been certified by the County Clerk's Office, or that the Candidate has paid the filing fee.
 - a. If the Petition of Candidacy was not verified by the County Clerk prior to submission to your office, deliver the original petition to the County Clerk's Election Office to have 5 electors verified that they are properly registered electors.
 - b. If the electors are required to be residents of the candidate's sub-district or zone, verify that the electors are in the correct sub-district or zone.
3. **Stamp** or write the date and time of receipt on the front of the Declaration of Candidacy and Petition of Candidacy.
4. **Complete** the fields and statement below.
5. **Transmit a copy of this Certification AND a copy of the Declaration of Candidacy** to the County Clerk for ballot preparation.

IMPORTANT

1. Verification of the candidate's qualifications and the validity of the signers of the petition should occur immediately upon receipt of the filing. This allows the candidate time to correct any errors in the filing.
2. Certification to the County Clerk should occur upon the verification of the candidate's qualifications and the validation of the signers of the petition. To assist the County Clerk in ballot preparation, do not HOLD these until the last day of filing.

Office name

1 Filing for the office of City Council Term Length 4yrs.
 City name Kuna Sub-district, zone, seat or position (if applicable) _____

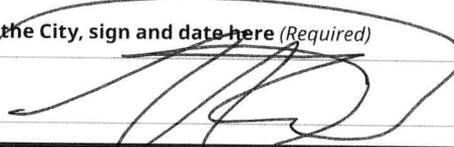
Candidate name

2 Ballot name Michael Rocco

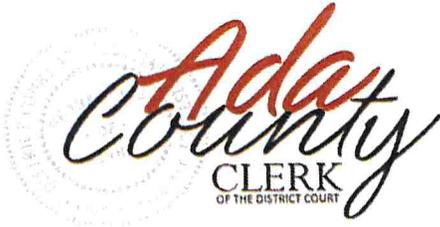
Certification

I, Nathan Stanley, certify that the qualifications of the candidate listed above have been verified, including the validity of the electors signing the Petition of Candidacy, and that the individual meets the requirements to run for the office indicated above and on the attached Declaration of Candidacy to be voted on at the Election to be held on the 4th day of November, 2025.

Clerk of the City, sign and date here (Required)



Date (mm/dd/yyyy) 08/26/2025



Trent Tripple
Clerk of the District Court

Katie Reed
Chief Deputy

400 N Benjamin Ln. Suite 100, Boise, ID 83704

Phone (208) 287-6860

ADA COUNTY AFFIDAVIT OF
CERTIFICATION OF SIGNATURES FOR A CANDIDATE PETITION

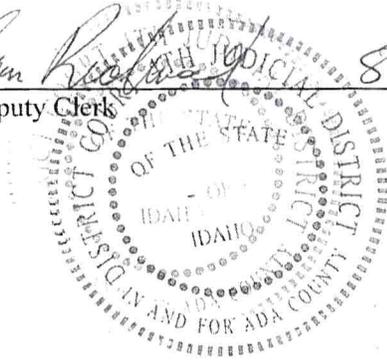
State of Idaho,)
) ss.
County of ADA)

To the Clerk of the *City of Kuna*, for the State of Idaho:

I, Trent Tripple, County Clerk of Ada County hereby
certify that 5 signatures on this petition
are those of qualified electors.

Trent Tripple

By PP *Katie Reed* Deputy Clerk 8/18/2025





DECLARATION OF CANDIDACY CITY OFFICE

COPY

REC'D-ADA CO ELECTIONS
2025 AUG 18 PM 2:18

Candidate Filing Period

Filing Begins: August 18, 2025
Filing Ends: August 29, 2025

Office name

1 Filing for the office of City Council Seat / District (if applicable) N/A
City KUNA

Candidate information

Enter your name as it appears on your voter registration.

First name Michael Middle name LOUIS
Last name Rocco Suffix (if applicable) N/A

Enter your name as you would like it to appear on the ballot.

2 Ballot name Michael Rocco
NOTE: You may not use nicknames that promote a particular political platform or are deemed offensive. Professional or military identifiers (Dr., M.D., PhD., Esq., CPA, Captain, General, etc.) are also not allowed on the ballot.

Enter your phone number and email address.

Phone number 908 693 4362 Email address michael.rocco9957@gmail.com
NOTE: Your phone number and email address are both required and will become publicly available upon request.

Registered address

Must be a street address. P.O. Boxes are not allowed.

3 Address (not P.O. Box) 1286 E. Fort Erie St Unit/Apt #
City KUNA State ID Zip 83634
 My mailing address is the same as my residential address. (If you check this box, then skip section 4)

Mailing address

Provide the address where you receive mail.

4 Address or P.O. Box 1286 E. Fort Erie St Unit/Apt #
City KUNA State ID Zip 83634

Homeowner's exemption

If you or your spouse have claimed a homeowner's exemption, provide the address.

I or my spouse have claimed a homeowner's exemption. (If no, proceed to section 6)
5 Address 1286 E. Fort Erie St Unit/Apt #
City KUNA State ID Zip 83634

Campaign finance

Choose only one option.

6 I have already created a Campaign Finance account and appointed a Treasurer. Or If any campaign finance contributions or expenditures reach or exceed \$500, I will create a Campaign Finance account with the Idaho Secretary of State and appoint a Treasurer.

Signature

Re-enter the city name, office, term length, and your residence address.

I, the undersigned, affirm that I am a qualified elector of the City of KUNA, State of Idaho, and that I have resided in the city for at least thirty (30) days.
I hereby declare myself to be a candidate for the office of City Council, for a term of 4 years, to be voted for at the election to be held on the 4th day of November, 2025, and certify that I possess the legal qualifications to fill said office, and that my residence address is _____
7

Candidate, sign and date here (Required)

X Michael Rocco Date (mm/dd/yyyy) 08/18/2025

Notary Use Only

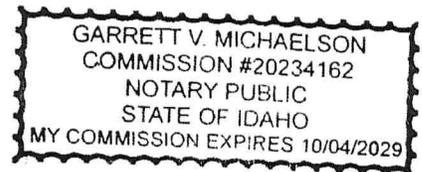
State of Idaho Ada
County of Ada

This record was signed before me on August 18, 2025
by Michael Rocco

Notary Signature Garrett V. Michaelson

Notary Printed Name Garrett V. Michaelson

My Commission Expires 10/04/2028





PETITION FOR CANDIDACY CITY OFFICE

COPY

Candidate Filing Period

Filing Begins: August 18, 2025
Filing Ends: August 29, 2025

Office name

1 Filing for the office of City Council Seat / District (if applicable) _____
City KUNA

Candidate name

2 Ballot name Michael Rocco

NOTE: Enter the candidate's name as it will appear on the ballot.

This petition must be filed in the office of the City Clerk no earlier than 8:00 a.m. on the twelfth Monday and no later than 5:00 p.m. on the tenth Friday before election day. The submitted petition must have affixed thereto the names of at least five (5) qualified electors who reside within the appropriate city.

Petition signatures

3 I, the undersigned, being a qualified elector of the City of KUNA, in the State of Idaho, do hereby certify and declare that I reside at the place set opposite my name and that I do hereby join in the petition of Michael Rocco, a candidate for the office of City Council to be voted at the election to be held on the 4th day of November, 2025.

Signature of Petitioner	Printed Name	Residence Address	Date Signed
	Jordan Boyd	1259 E. Fort Erie St. KUNA, ID 83634	08/17/2025
	Dancer Boren	1239 E. Whig Dr. Kuna, ID 83634	8-17-25
	Kevin Boren	"	"
	Jim McKeen	1230 E Fort Erie St. Kuna ID 83634	8-17-25
	Lynn McKeen	1230 E Fort Erie St Kuna ID	8/17/25
	Jamie Roach	1301 E. Fort Erie St, Kuna ID 83634	8/17/25
7.			
8.			

Circulator Signature

4 I, Michael Rocco, being first duly sworn, say: That I am a resident of the State of Idaho and at least eighteen (18) years of age; that every person who signed this sheet of the foregoing petition signed his or her name thereto in my presence; I believe that each has stated his or her name and residence address correctly; and that each signer is a qualified elector of the State of Idaho, and the City of KUNA.

Circulator, sign and date here (Required)

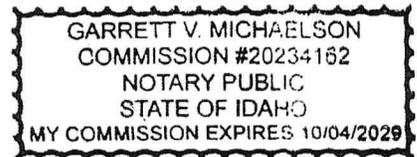
x Michael Rocco Date (mm/dd/yyyy) 08/18/2025

Notary Use Only

State of Idaho Ada
County of _____

This record was signed before me on August 18 2025
by Michael Rocco
Print name of signer

Notary Signature Garrett V. Michaelson
Notary Printed Name Garrett V. Michaelson
My Commission Expires 10/04/2029



Place Notary Seal Above



DECLARATION OF CANDIDACY CITY OFFICE

RECEIVED

11:50 AM

Candidate Filing Period

AUG 18 2025

Filing Begins: August 18, 2025
Filing Ends: August 29, 2025

Office name

1 Filing for the office of City Council Seat / District (if applicable) N/A
City KUNA **KUNA CITY CLERK**

Candidate information

Enter your name as it appears on your voter registration.

First name Michael Middle name Louis
Last name Rocco Suffix (if applicable) N/A

Enter your name as you would like it to appear on the ballot.

2 Ballot name Michael Rocco

NOTE: You may not use nicknames that promote a particular political platform or are deemed offensive. Professional or military identifiers (Dr., M.D., Ph.D., Esq., CPA, Captain, General, etc.) are also not allowed on the ballot.

Enter your phone number and email address.

Phone number 908 693 4362 Email address michael.rocco9957@gmail.com

NOTE: Your phone number and email address are both required and will become publicly available upon request.

Registered address

Must be a street address. P.O. Boxes are not allowed.

3 Address (not P.O. Box) 1286 E. Fort Erie St Unit/Apt # _____
City KUNA State ID Zip 83634

My mailing address is the same as my residential address. (If you check this box, then skip section 4)

Mailing address

Provide the address where you receive mail.

4 Address or P.O. Box 1286 E. Fort Erie St Unit/Apt # _____
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City KUNA State ID Zip 83634

Campaign finance

Choose only one option.

6 I have already created a Campaign Finance account and appointed a Treasurer. **Or** If any campaign finance contributions or expenditures reach or exceed \$500, I will create a Campaign Finance account with the Idaho Secretary of State and appoint a Treasurer.

Signature

Re-enter the city name, office, term length, and your residence address.

I, the undersigned, affirm that I am a qualified elector of the City of KUNA, State of Idaho, and that I have resided in the city for at least thirty (30) days.

7 I hereby declare myself to be a candidate for the office of City Council, for a term of 4 years, to be voted for at the election to be held on the 4th day of November, 2025, and certify that I possess the legal qualifications to fill said office, and that my residence address is _____

Candidate, sign and date here (Required)

Michael Rocco

Date (mm/dd/yyyy) 08/18/2025

Notary Use Only

State of Idaho Ada
County of Ada

This record was signed before me on August 18, 2025
by Michael Rocco
Print name of signer(s)

Notary Signature Garrett V. Michaelson

Notary Printed Name Garrett V. Michaelson

My Commission Expires 10/04/2029



Place Notary Seal Above



**PETITION FOR CANDIDACY
CITY OFFICE**

11:50 AM
RECEIVED

AUG 18 2025

KUNA CITY CLERK

Candidate Filing Period

Filing Begins: August 18, 2025
Filing Ends: August 29, 2025

Office name

1 Filing for the office of City Council Seat / District (if applicable) _____
City KUNA

Candidate name

2 Ballot name Michael Rocco
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Petition signatures

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	Signature of Petitioner	Printed Name	Residence Address	Date Signed
1.		Jordan Boyd	1259 E. Fort Erie St KUNA, ID 83634	08/17/2025
2.		Denece Boren	1239 E. Whig Dr. Kuna, ID 83634	8-17-25
3.		Kevin Boren	" "	" "
4.		Jim McKeen	1230 E. Fort Erie St. Kuna ID 83634	8-17-25
5.		Lynn McKeen	1230 E. Fort Erie St Kuna ID	8/17/25
6.		Jamie Roach	1301 E. Fort Erie St, Kuna ID 83634	8/17/25
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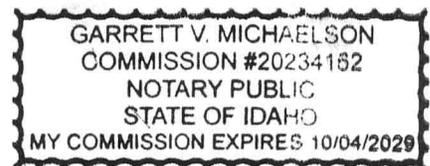
Circulator, sign and date here (Required)

X Michael Rocco

Date (mm/dd/yyyy) 08/18/2025

Notary Use Only

State of Idaho Ada
County of Ada
This record was signed before me on August 18 2025
by Michael Rocco
Print name of signer(s)
Notary Signature Garrett V. Michaelson
Notary Printed Name Garrett V. Michaelson
My Commission Expires 10/04/2029



Place Notary Seal Above