

## DECLARATION OF INTENT AND OATH OF CANDIDACY FOR TRUSTEE CANDIDATES

To the School District Clerk of School District No. \_\_\_\_\_, \_\_\_\_\_ County, State of Montana:

Filing for the office of School District Trustee: For a \_\_\_\_-year term at the Annual Regular School District Election to be held on the \_\_\_\_ day of May, 20\_\_.

Candidate Name (Print, as it should appear on the ballot):

\_\_\_\_\_

Mailing address: \_\_\_\_\_

City and State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Residence address: \_\_\_\_\_

City and State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Contact Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

*I hereby affirm that I possess, or will possess, within the constitutional and statutory deadlines, the qualifications prescribed by the Constitution and law of the United States and the State of Montana.*

DATED this \_\_\_\_ day of \_\_\_\_\_, 20\_\_

\_\_\_\_\_  
(Signature of Candidate)

Candidate must sign and acknowledge this Declaration of Intent before a Notary Public, if mailed, or before the Election Administrator or Deputy, if delivered in person.

State of Montana, County of \_\_\_\_\_

Signed and sworn to before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_, by \_\_\_\_\_  
*Printed Name of Candidate*

\_\_\_\_\_  
Signature of Notary or Public Official

\_\_\_\_\_  
Printed name of Notary or Public Official

Notary Public for the State of Montana (include stamp/seal)

Residing at: \_\_\_\_\_

My Commission Expires: \_\_\_\_\_, 20\_\_