



Write-In Candidate Declaration of Intent and Oath of Candidacy

FOR FILING OFFICE ONLY

Filed this _____ day of _____, 20____

Document # _____

By: _____
Deputy or Filing Officer

DECLARATION AND OATH TO BE FILED WITH SECRETARY OF STATE COUNTY ELECTION ADMINISTRATOR

FOR A PRIMARY ELECTION: nomination to the office of _____ as a (Insert Party Name unless office is Nonpartisan) _____ candidate at the Primary Election held on _____, 20____.

FOR A GENERAL ELECTION: election to the office of _____ as a candidate at the General Election held on _____, 20____.

Candidate Name: _____

Mailing Address: _____
Street or PO Box City Zip

Residence Address: _____
Street City Zip

County of Residence: _____ Home Phone: _____ Work Phone: _____

Email Address: _____ Website Address: _____

IF THIS DECLARATION IS FOR THE OFFICE OF GOVERNOR, YOU MUST COMPLETE THE FOLLOWING INFORMATION:

LIEUTENANT GOVERNOR NAME (PRINTED EXACTLY AS IT SHOULD APPEAR ON THE BALLOT): _____

MAILING ADDRESS: _____ RESIDENCE ADDRESS: _____

PHONE: _____ EMAIL ADDRESS: _____ WEBSITE ADDRESS: _____

IF THIS DECLARATION IS FOR THE STATE LEGISLATURE, YOU MUST COMPLETE THE FOLLOWING INFORMATION:

(a) I hereby certify that I am either a resident of the county in which I am a candidate, if it contains one or more legislative districts, or of the legislative district if it contains all or parts of more than one county, OR

(b) I hereby certify that I will meet the residency qualification(s) in (a) above for 6 months preceding the general election and will notify the office of the Secretary of State in writing when I qualify or if I do not qualify.

OATH OF CANDIDACY - CANDIDATE MUST SIGN IN THE PRESENCE OF A NOTARY PUBLIC OR AN OFFICER OF THE OFFICE WHERE THIS FORM IS FILED:

I hereby certify that I am a citizen of the United States and a resident of the State of Montana, and do affirm that I possess the qualifications prescribed by the Constitution and laws of the United States and the State of Montana.

Signature of Candidate

Date

NOTARY OR AUTHORIZED OFFICER

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 Public

Notary Public for the State of _____

Residing at: _____

My commission expires: _____, 20____

Where to file for Federal, Statewide, State District and Legislative offices:

Montana Secretary of State
State Capitol, 2nd Floor, Room 260
PO Box 202801
Helena, MT 59620-2801
By Fax: 406-444-2023

Where to file for County, City and most Local District offices:

County Election Administrator's Office
A list of county election offices may be found at: sos.mt.gov/elections

[SEAL/STAMP]



Write-In Candidate Declaration of Intent and Oath of Candidacy – Reverse

**FOR FILING
OFFICE ONLY**

Filed this _____ day of _____, 20____

Document # _____

By: _____
Deputy or Filing Officer

DECLARATION OF INTENT FOR WRITE-IN CANDIDATE (CONTINUED)

Candidate Name (please print) _____

IF THIS PETITION IS FOR THE OFFICE OF GOVERNOR, YOU MUST COMPLETE THE FOLLOWING INFORMATION:

Lieutenant Governor Candidate Name: _____
Lieutenant Governor Candidate Name

FILING FEE AND CANDIDATE CERTIFICATIONS

Candidate filing fee, if applicable, in the amount of \$ _____ is hereby submitted with this Declaration. I have checked both boxes below:

- I certify that pursuant to [13-10-211](#) (6), MCA, I understand that a declaration of intent for a write-in candidate is not valid until any filing fee required under [13-10-202](#), MCA is received by the Secretary of State or election administrator, as applicable. I further certify that this declaration serves as my declaration of acceptance of the nomination or election pursuant to [13-10-204](#) and [13-15-111](#); **AND**
- I also understand that pursuant to [13-10-211](#) (1), MCA, a write-in candidate must file any initials, nicknames, derivatives, or diminutives of his/her name that the candidate wishes to have counted if written in by a voter instead of how the write-in candidate's name is listed above.

WRITE-IN CANDIDATE DESIGNATIONS

Pursuant to [13-10-302](#) and [13-15-206](#), MCA, a write-in vote may only be counted if the oval, box, or other designated voting area on the ballot is marked and the write-in vote identifies a declared write-in candidate by any of the designations filed in the write-in candidate's declaration of intent which must contain:

- i) first and last name;
- ii) initials, if any, used instead of a first name, or first and middle name, and last name;
- iii) nickname, if any, used instead of a first name, and the last name; and
- iv) a derivative or diminutive name, if any, used instead of a first name, and last name:

Therefore, as part of my declaration of intent to be a write-in candidate, I am listing the following variations of my name pursuant to [13-10-211](#) (1), MCA, **including my last name and at least an initial**, which is required by law for each variation:

If additional, list below: