



Declaration for Nomination and Oath of Candidacy

*A candidate may only withdraw from candidacy by filing with the proper filing officer a notarized statement stating the reason for withdrawal no later than 5:00 p.m. on the last day to file for a primary election or no later than 85 days before the general election.

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

Filing for
office of:

Full name of office including district and/or department numbers if applicable

☐

Name of Political Party

☐

Nonpartisan

Candidate for the: ☐ Primary ☐ General ☐ Other (_____) election to be held on _____, 20____

Candidate Name (printed exactly as it should appear on the ballot): _____

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, PLEASE 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, PLEASE 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.

FILING FEE - FEE MUST BE PAID BEFORE FILING IS VALID

☐ Candidate Filing Fee, if applicable, in the amount of \$ _____ is hereby submitted with this Declaration and Oath of Candidacy.

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

**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
Online: candidates.mt.gov
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

Signature of Notary Public for the State of Montana

Printed Name of Notary Public

Residing at: _____

My commission expires: _____, 20____