DECLARATION OF INTENT AND OATH OF CANDIDACY FOR TRUSTEE CANDIDATES

| To the School District Clerk/Election Administrator of School District No. 1, Daniels County, State of | |
|--|--|
| Montana: | |

Filing for the office of School District Trustee: For a <u>3</u>-year term at the Annual Regular School District Election to be held on the 2^{nd} day of <u>May, 2023</u>.

| Candidate Name (Print): | | | | |
|--|----------------|--|--|--|
| Mailing address: | | | | |
| | 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 | |
| SEAL/STAMP | | Printed name of Notary or Public Official | |
| | | Notary Public for the State of Montana | |
| | | Residing at: | |
| | | My Commission Expires:, 2 | 20 |

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Candidate Name (Print): _____

This Declaration of Intent for a trustee position must be submitted to the school district clerk/election administrator no later than 40 days before the election. **20-3-305, MCA**

Pursuant **to 13-37-206, MCA**, all candidates for trustee positions in first-class districts located in counties with populations of 15,000 or more OR in county high school districts having student enrollments of 2,000 or more must report their campaign finance activities to the Montana Commissioner of Political Practices. Current forms are available at:

http://politicalpractices.mt.gov/5campaignfinance/candidateinfo.mcpx

Please return this form to:

District Clerk: <u>Colleen Drury, Business Manager/Clerk</u> District: <u>Scobey School District No 1, Daniels County, MT</u> Address: <u>205 2nd Ave E, PO Box 10, Scobey, MT 59263</u> Fax: <u>406-487-2204</u> Email: <u>cdrury@scobeyschools.com</u>