



# Declaration for Nomination and Oath of Candidacy - County and Municipal offices

Declaration and Oath for Primary Election to be Filed with County Election Administrator

Filing for office of: \_\_\_\_\_  Name of Political Party \_\_\_\_\_  Nonpartisan  
Full name of office including district and/or department numbers if applicable

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

Mailing Address: \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
Street or PO Box

Residence Address: \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
Street

County of Residence: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_ Website Address: \_\_\_\_\_

**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 affirm that I possess, or will possess within constitutional and statutory deadlines, 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*

Seal/Stamp

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

[Montana notaries must complete the following if not part of stamp at left]

\_\_\_\_\_  
Printed Name of Notary Public

Notary Public for the State of \_\_\_\_\_

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

My commission expires: \_\_\_\_\_, 20\_\_\_\_

**Where to file for Flathead County, City and most Local District offices:**  
Flathead County Election Department  
800 S Main St  
Kalispell, MT 59901