

**DECLARATION FOR NOMINATION**  
**Precinct Committeeman or Precinct Committeewoman**  
**13-10-201 & 13-38-201, MCA**

To the Election Administrator and Electors of the County of \_\_\_\_\_, State of Montana, and to the Members of the \_\_\_\_\_ Party:

I, the undersigned citizen of the United States of America and resident of the Precinct herein named in the said county, declare pursuant to Section 13-38-201, Montana Code Annotated, that I am a candidate for the election by said Party for the office of Precinct (Committeeman OR Committeewoman) in Precinct No. \_\_\_\_\_ in the above named county, at the election to be held in said Precinct and County on \_\_\_\_\_, 20\_\_\_\_ and for such purpose do affirm that I possess the qualifications prescribed by the Constitution and laws of Montana for the office herein named, and that:

1. My full name as it is to appear on the ballot is: \_\_\_\_\_
2. My mailing address is: \_\_\_\_\_
3. City, State and Zip Code \_\_\_\_\_ Phone: \_\_\_\_\_
4. My e-mail address is: \_\_\_\_\_ My website address is: \_\_\_\_\_

*Candidate must sign and acknowledge below in the presence of a Notary Public if mailed, or in the presence of the Election Administrator or deputy if delivered in person.*

DATE \_\_\_\_\_, 20\_\_\_\_  
(Signature of Candidate)

**NOTE:** A candidate may not file for more than one public office. Since the office of precinct committeeperson is not defined as a public office, a candidate for precinct committeeperson may be a candidate for another office.

STATE OF MONTANA )  
County of \_\_\_\_\_ )

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me, personally appeared the above named candidate, known to me or proved to me to be the person whose name is subscribed to the above declaration, and acknowledged to me that he/she executed the same.

\_\_\_\_\_  
Notary Public for the State of Montana  
\_\_\_\_\_  
Printed Name of Notary Public  
Residing at \_\_\_\_\_  
My Commission Expires \_\_\_\_\_, 20\_\_\_\_  
By: \_\_\_\_\_  
Deputy (if not notarized)

SEAL

Submit this form to County Election Administrator.

**FOR  
OFFICE  
USE ONLY**

Filed on _____ under document number _____ for Secretary of State, by _____, Deputy or Filing Officer.
---