



Declaration for Nomination and Oath of Candidacy

FOR FILING OFFICE ONLY

Filed this 9 day of June, 2023
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By: Btkut
Deputy of Filing Officer

DECLARATION AND OATH OF CANDIDACY TO BE FILED WITH SECRETARY OF STATE OR COUNTY ELECTION ADMINISTRATOR AS APPLICABLE

Filing for office of: Billings City Council Ward 3 OR Nonpartisan
Full name of office including district and/or department numbers if applicable Name of Political Party

Candidate Name (printed exactly as it should appear on the ballot): Charles W. Loveridge

Mailing Address: 1206 Cardova St City and State: Billings, MT Zip Code: 59101

Residence Address: 2342 Glengarry Lane City and State: Billings, MT Zip Code: 59101

County of Residence: Yellowstone Contact Phone: 406 670-3796 Email Address: charlie4billings.com 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 SELECT ONE OF THE FOLLOWING:

- (a) I hereby affirm 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 affirm 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 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.

Charles W. Loveridge
Signature of Candidate

6/8/23
Date

NOTARY PUBLIC OR AUTHORIZED OFFICER

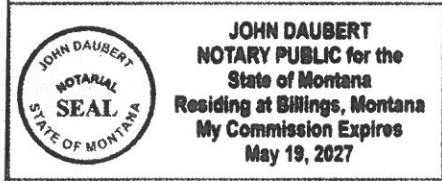
State of Montana

County of Yellowstone

Signed and sworn to before me this 9th day of June, 2023 by

Charles W. Loveridge
Printed Name of Candidate

[Signature]
Signature of Notary or Public Official



[SEAL/STAMP]

Where to file Federal, Statewide, State District and Legislative offices:
Montana Secretary of State
P.O. Box 202801
State Capitol Building, 1301 E. 6th Ave
2nd Floor, Room 260
Helena, MT 59620
Online: sosmt.gov/elections/filing/
Fax: 406-444-2023

Where to file County, City and most Local District offices:
County Election Office
A list of county election offices may be found at: sosmt.gov/elections