

## Declaration for Nomination and

	original sited 5/19/23
LING	Filed this 24 day of 1794 2023
O II	Document # 4 2 3 - 1 7
R F	Fee paid: cash check credit
5.6	Ву:
	Deputy or Filing Officer

Oath of Candida	су	Fee paid: cash check	ck credit
DECLARATION AND OATH OF CANDIDACY TO BE FILED	WITH SECRETARY OF STATE OR COUNTY E	LECTION ADMINISTRATOR AS APPLICABLE	
office of: Full name of office including district and/	or department numbers if applicable	Name of Political Party	OR Nonpartisan
Candidate Name (printed exactly as it should ap	pear on the ballot):	Y WHEELER	
Mailing Address  1310 Bentooth Dri	City and	State Wel MT	Zip Code
Residence Address 13 10 blantooth	PWC Sand	State MT	Zip Code Sq Olde
County of Residence Contact Photographics 406-6	Email Address www. Nwe	website Address	o Com
IF THIS DECLARATION IS FOR THE OFFICE OF GOVERNO	R, YOU MUST COMPLETE THE FOLLOWING	INFORMATION:	
Lieutenant Governor Name (printed exactly as it	should appear on the ballot):		
Mailing Address:	Residen	ce Address:	
Phone: Email Address	ss:	Website Address:	
IF THIS DECLARATION IS FOR THE <b>STATE LEGISLATURE</b> ,	YOU MUST SELECT ONE OF THE FOLLOWIN	NG:	
(a) I hereby affirm that I am either a resident legislative district if it contains all or parts		te, if it contains one or more legislative di	stricts, or of the
(b) I hereby affirm that I will meet the resider of the Secretary of State in writing when I		onths preceding the general election and	will notify the office
FILING FEE – FEE MUST BE PAID BEFORE FILING IS VALID	):		
Candidate Filing Fee, if applicable, in the amount	unt of \$ 6000 is here	eby submitted with this Declaration and O	ath of Candidacy.
OATH OF CANDIDACY - CANDIDATE MUST SIGN IN THE I hereby affirm that I possess, or will possess wit the United States and the State of Montana.			
Casey J. Wa	self	5/24/23	
Signature of Candidate		Date	
NOTARY PUBLIC OR AUTHORIZED OFFICER			
Where to file Federal, Statewide,	State of Montana County of	ul	
State District and Legislative offices:  Montana Secretary of State P.O. Box 202801	Signed and sworn to before me this	at day of Mu	, 20 <u>23</u> _by
State Capitol Building, 1301 E. 6 <sup>th</sup> Ave 2 <sup>nd</sup> Floor, Room 260 Helena, MT 59620	TRICIA JOHN	ison (aseltw)	reelec

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

NOTARY PUBLIC for the printed Name of Candidate State of Montana

Residing at Laurel, Montana My Commission Expires October 19, 2024

Signature of Notary or Public Official

[SEAL/STAMP]