## 00000002



A list of county election offices may be found at: sosmt.gov/elections

## Write-In Candidate Declaration of Intent

FOR FILING OFFICE ONLY	Filed this 21 day of Feb	20
	Document # Fee paid:	credit
	Deputy or Filing Officer	

	and Oath C	)i Cariulua	icy .	- 5	Deputy or Filir	ng Officer	
DECLARATION AN	ND OATH OF CANDIDAC	Y TO BE FILED WIT	H SECRETARY OF STAT	E OR ELECTION ADMINISTRA	ATOR AS APPLICABLE		
office of Full name	ne of office including dist	DISMG#8 rict and/or dept. #s		ty Primary: Name of Party		OR Nonparti	san <i>or</i> General
Candidate Nam	ne: Alyssa	MEA	invis				
Mailing Addres	is			City and State			Zip Code
15/6 K	Esebud	Lin		Billing.	s mt		37707
Residence Add	ress			City and State	nat		Zip Code
15/6	Rosebu	1 Cn		13/11/mg	5 1111		11/01
County of Resid	dence	Contact Phone	Email	Address		bsite Address	
Yallow	stone	406223	7703 aly	159-Francis Cl	outlook.		
IF THIS DECLARA	TION IS FOR THE OFFIC	E OF GOVERNOR, \	OU MUST COMPLETE	THE FOLLOWING INFORMA	ITION:		
Lieutenant Gov	vernor Name (printe	d exactly as it sho	ould appear on the b	pallot):			
				Residence Addres	ss:		
Mailing Addres	ss: L						
Phone:		Email Address:			Website Ac	ldress: [	
IF THIS DECLARA	ATION IS FOR THE <b>STAT</b>	E LEGISLATURE, YO	U MUST SELECT ONE	OF THE FOLLOWING:			
		in- all ar narte at	more than one coll	n I am a candidate, if it co nty, <b>OR</b>			
(h) I hereh	<b>by affirm</b> that I will m Secretary of State in	eet the residenc	y qualification(s) in (	a)above for 6 months pr	eceding the general	election and will n	otify the office
	Secretary of State in E MUST BE PAID BEFOR		idiliyy ol iy rao noc qe				
Diffuse Company of Propagation Section	Filing Fee, if applicab		at of \$	is hereby subm	nitted with this Decl	aration and Oath o	f Candidacy.
	man and the same of the same o		ACCENICE OF A NOTAR	V DUBLIC OR AN OFFICER O	F THE OFFICE WHERE	THIS FORM IS FILED:	
OATH OF CAND	DACY - CANDIDATE MI	ust sign in the Pi vill possess withi	n constitutional and	statutory deadlines, th	e qualifications pre	scribed by the Con	stitution and laws
of the United	States and the State	of Montana.			11 1	Total Control	
//	Ulma	DIN	2		2/16/2	025	
U <sub>S</sub>	Signature of Candidat	K Co		Da	ate		
NOTARY PUBLIC	OR AUTHORIZED OFFI	CER					
State of Mont	tana				\ .	,	
Signed and sw	vorn to before me th	is\\eda	y of Reb.	20_ <b>~3</b>	by Alusso	of Candidate	15
	ile for Federal, State				Printed Name o	Canadate	
State Distri	ct and Legislative of	fices:		$\leq$	Junes M	, West	-
Montana Se	ecretary of State ol, 2 <sup>nd</sup> Floor, Room 2	60		Signatur	e of Notary or Publi		
PO Box 202		Γ	E M WE	SUNEE M WESTER		nee M V	Jester
	59620-2801		JAP NOTARIA, PED	NOTARY PUBLIC for the		Name of Notary P	ublic
CONTRACTOR SERVICES CONTRACTOR SERVICES	sosmt.gov 406-444-2023		* SEAL )*	State of Montana Residing at Billings, Mon	ntana Notary	Public for the Stat	e of Montan a
		nd	ST ST	My Commission Expir	es		
most Local	ile for County, City a District offices:	110	F OF MONTON	March 22, 2025	Residir	ig at: 50150	unsonhan
	ction Office		FOFAI	/CTANADI	My cor	nmission expires:	3-22 20 25

[SEAL/STAMP]

My commission expires: 3-22, 20 25



## Write-In Candidate Declaration of Intent and Oath of Candidacy – Reverse

FOR FILING OFFICE ONLY	Filed thisday of	,20
	Document #	
다 는 다	By:	

	Reverse
DECLARATION AND	DATH OF CANDIDACY TO BE FILED WITH SECRETARY OF STATE OR ELECTION ADMINISTRATOR AS APPLICABLE
Candidate Name	Augssa M Rancis
IF THIS DECLARAT	TION AND OATH IS FOR THE OFFICE OF GOVERNOR, YOU MUST COMPLETE THE FOLLOWING INFORMATION:
	nination of Lieutenant Governor:  Lieutenant Governor Candidate Name
	rice, if applicable, in the amount of \$ is hereby submitted with this Declaration. I have checked both
I certify that filing fee require that this declara	ed under $\frac{13-10-211}{13-10-202}$ (6), MCA, I understand that a declaration of intent for a write-in candidate is not valid until any ed under $\frac{13-10-202}{13-10-202}$ , MCA is received by the Secretary of State or election administrator, as applicable. I further certify ation serves as my declaration of acceptance of the nomination or election pursuant to $\frac{13-10-204}{13-10-204}$ and $\frac{13-15-111}{13-10-204}$ ; AND
I understar of the candidat name is listed a	nd that pursuant to 13-10-211(1), MCA, a write-in candidate must file any initials, nicknames, derivatives, or diminutives e's name that the candidate wishes to have counted if written in by a voter instead of how the write-in candidate's above.
WRITE-IN CANDIDA	ATE DESIGNATIONS
hallot is market	- <u>10-302</u> and <u>13-15-206</u> , MCA, a write-in vote may only be counted if the oval or other designated voting area on the dand the write-in vote identifies a declared write-in candidate by any of the designations filed in the write-in claration of intent which must contain:
ii) initials iii) nickna iv) a deri	nd last name; s, if any, used instead of a first name, or first and middle name, and last name; ame, if any, used instead of a first name, and the last name; and vative or diminutive name, if any, used instead of a first name, and last name:
Therefore, as p	part of my declaration of intent to be a write-in candidate, I am listing the following variations of my name pursuant to MCA, <b>including my last name and at least an initial</b> , which is required by law for each variation:
- A	sh Famis
Arac	a m hanus
Mus	su molly Francis
100	
HP	
If additional, I	list below: