



Declaration for Nomination and Oath of Candidacy

Voter ID 746482

JAN 27 2023

FOR FILING OFFICE ONLY

Filed this 27th day of Jan., 2023
 Document # 000001
 Fee paid: cash check 15.00 credit
 By: Ann Kelly
 Deputy or Filing Officer

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

Filing for office of: Lockwood Water & Sewer District _____ 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): Carlotta R Hecker

Mailing Address: 3325 Dove Ave City and State: Billings, MT Zip Code: 59101
Billings MT 59th CN

Residence Address: 3325 Dove Ave City and State: Billings, MT Zip Code: 59101

County of Residence: Yellowstone Contact Phone: 406-248-5767 Email Address: Carheck@AOL.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 \$ 15.00 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.

Carlotta R Hecker
Signature of Candidate

1-27-23
Date

NOTARY PUBLIC OR AUTHORIZED OFFICER

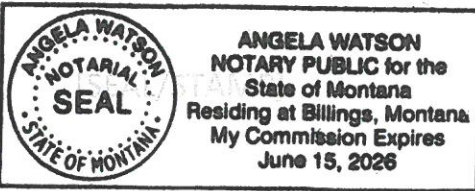
State of Montana

County of Yellowstone

Signed and sworn to before me this 27th day of January, 2023 by _____

Carlotta R Hecker
Printed Name of Candidate

Angela Watson
Signature of Notary or Public Official



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