

DECLARATION OF INTENT AND OATH OF CANDIDACY FOR TRUSTEE CANDIDATES

To the School District Clerk of School District No. 4, Yellowstone County, State of Montana:

Filing for the office of School District Trustee: For a \_\_\_-year term at the Annual Regular School District Election to be held on the \_\_\_ day of May, 20\_\_.

Candidate Name (Print, as it should appear on the ballot):

Amy Sironi

Mailing address: 2930 Wise Lane

City and State: Billings MT Zip Code: 59101

Residence address: 2930 Wise Lane

City and State: Billings MT Zip Code: 59101

Contact Phone: 406-491-2769 Email Address: justkruz@hotmail.com

I hereby affirm that I possess, or will possess, within the constitutional and statutory deadlines, the qualifications prescribed by the Constitution and law of the United States and the State of Montana.

DATED this 14 day of March, 2023

Amy Sironi  
(Signature of Candidate)

Candidate must sign and acknowledge this Declaration of Intent before a Notary Public, if mailed, or before the Election Administrator or Deputy, if delivered in person.

State of Montana, County of Yellowstone

Signed and sworn to before me this 14th day of March, 2023, by Amy Sironi  
Printed Name of Candidate

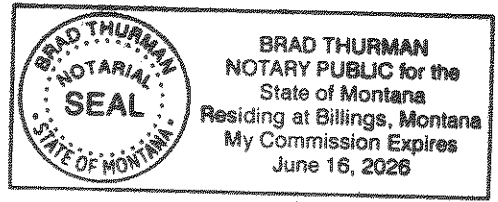
Brad Thurman  
Signature of Notary or Public Official

Brad Thurman  
Printed name of Notary or Public Official

Notary Public for the State of Montana (include stamp/seal)

Residing at: 1302 24th St W.

My Commission Expires: 6-16-2026, 2026  
June 16th



**DECLARATION OF INTENT AND OATH OF CANDIDACY FOR TRUSTEE CANDIDATES**

Candidate Name (Print): Amy Sironi

This Declaration of Intent for a trustee position must be submitted to the school district clerk no later than 40 days before the election. **20-3-305, MCA**

Pursuant to **13-37-206, MCA**, all candidates for trustee positions in first-class districts located in counties with populations of 15,000 or more OR in county high school districts having student enrollments of 2,000 or more must report their campaign finance activities to the Montana Commissioner of Political Practices. Current forms are available at: [Link to the MT Political Practices webpage](#)

**Please return this form to:**

District Clerk: \_\_\_\_\_  
District: \_\_\_\_\_  
Address: \_\_\_\_\_ City, State, Zip \_\_\_\_\_  
Fax: \_\_\_\_\_ Email: \_\_\_\_\_