

DECLARATION OF INTENT AND OATH OF CANDIDACY FOR TRUSTEE CANDIDATES

To the School District Clerk/Election Administrator of School District No. 7-70 Yellowstone
County, State of Montana:

Filing for the office of School District Trustee: For a 3-year term at the Annual Regular School District
Election to be held on the 2 day of May, 2023.

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

Rene Teeters Roth

Mailing address: 1649 US Hwy 212 South

City and State: Laurel, MT

Zip Code: 59044

Residence address: 1649 US Hwy 212 South

City and State: Laurel, MT

Zip Code: 59044

Contact Phone: 4066709275

Email Address: jrroth@gmail.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 13 day of February, 2023

Rene T Roth
(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 13 day of February, 2023, by Rene T Roth
Printed Name of Candidate

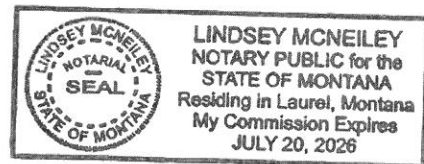
Lindsey McNeiley
Signature of Notary or Public Official

Lindsey McNeiley
Printed name of Notary or Public Official

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

Residing at: Laurel, MT

My Commission Expires: July 20, 2023



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Candidate Name (Print): Rene Teeters Roth

This Declaration of Intent for a trustee position must be submitted to the school district clerk/election administrator 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:	
Name of Election Official:	_____
Representing:	_____
Address:	_____ City, State, Zip _____
Fax:	_____ Email: _____