DECLARATION OF INTENT AND OATH OF CANDIDACY FOR TRUSTEE CANDIDATES

To the School District Clerk of Cooke City School District No. 9, Park 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 6th day of May, 2025.

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

Mailing address:			
City and State:			
Residence address:			
City and State:			
Contact Phone:	Email Address:		
I hereby affirm that I possess, or will pos qualifications prescribed by the Constitution this day of	and law of the United St		-
(Signature of Candidate)			
Candidate must sign and acknowledge this logithtic before the Election Administrator or Deputy		ore a Nota	ry Public, if mailed, or
State of Montana, County of			
Signed and sworn to before me this da	ay of, 20_		Printed Name of Candidate
Signature of Notary or Public Official			
Printed name of Notary or Public Official			
Notary Public for the State of Montana (incl	ude stamp/seal)		
Residing at:			
My Commission Expires:	, 20		



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Candidate Name (Print): _____

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: <u>Link to the MT Political Practices webpage</u>

Please return this form to:	
District Clerk: Laura Carroccia	
District: Cooke City School District 9	
Address: PO Box 205, Melville, MT 59055	
Fax:	Email: cookecityclerk@gmail.com