



# Declaration for Nomination and Oath of Candidacy Carbon County Precinct Committeeman or Precinct Committeewoman

DECLARATION AND OATH OF CANDIDACY TO BE FILED WITH COUNTY ELECTION ADMINISTRATOR

Filing for the office of (select one):  Precinct Committeeman  Precinct Committeewoman for Precinct Number: 9

Name of Political Party: Republican

Candidate Name (printed exactly as it should appear on the ballot): MARY Horman

Mailing Address: P O Box 2591 RL 59068  
Street or PO Box City Zip

Residence Address: 219 South Hapin RL 59068  
Street City Zip

County of Residence: Carbon Website Address: \_\_\_\_\_

Email Address: danielhormanrealestate@gmail.com Phone Number: 406 855-4141

Please note that pursuant to 13-38-201, MCA, if the number of candidates nominated for a party's precinct committee representatives is less than or equal to the number of positions to be elected, the election administrator may give notice that the party's precinct committee election will not be held in that precinct.

**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.*

[Signature]  
Signature of Candidate

January 30, 2024  
Date

NOTARY PUBLIC OR AUTHORIZED OFFICER  
State of Montana  
County of Carbon

Signed and sworn to before me this 30<sup>th</sup> day of January, 2024 by Mary Horman  
Printed Name of Candidate

[Signature]  
Signature of Notary or Public Official

Crystal Boascio  
Printed Name of Notary Public  
Notary Public for the State of  
Residing at: \_\_\_\_\_  
My commission expires: \_\_\_\_\_, 20\_\_\_\_



Carbon County Elections:  
PO Box 887  
17 W 11<sup>th</sup> Street  
Red Lodge, MT 59068  
elections@co.carbon.mt.us  
406-446-1220 - phone  
406-446-2640 - Fax

OR FILING OFFICE ONLY  
Filed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_  
By: \_\_\_\_\_  
Deputy or Filing Officer