

LING	Filed this day of	, 20
FOR FILL	Document # Fee paid: cash check	credi
- 0	By:	

Declaration	n for Nomination	on and	O II	Oocument#		
Oath of Ca			0 出	ee paid: By:	cash check_	credit
DECLARATION AND O	ATH OF CANDIDACY TO BE FILED	) WITH SECRETARY	1000	Deputy or	Filing Officer	DUCABLE
Filing for	O ATT O	7 WITH SECRETARI	TOI STATE ON COOK	T ELECTION P	DIVINION AS AF	TICABLE
office of: 13 ridgen 1	Trea Parks Edistrict and/or department num	Rec , B	Name o	of Political Par	ty	OR Nonpartisan
Candidate Name (printed exactly as	it should appear on the ba	llot): Ray	ida N.	ovak	ovich	
Mailing Address	C	ity and State			Zip Code	
P.O. Bx 56.1		Bridge	-6	Wit	59014	
Residence Address			ity and State			Zip Code
215 N 'B"	Street		Bridge	V	m +	59014
County of Residence	Contact Phone	Email Address	s		Website Address	
Carbon	406662-3911	Cam	1-9			
Lhereby affirm I am a registered individuals under the age of 18 a	voter in the State of Monta	na or will be by t	the candidate filing	deadline. (L	Does not apply to Fed	deral candidates or
IF THIS DECLARATION IS FOR THE OFFICE						
Lieutenant Governor Name (printed	and the second s					
	exactly as it should appear					
Mailing Address:		R	esidence Address:		145	
Phone:	Email Address:			Websit	e Address:	
IF THIS DECLARATION IS FOR THE STATE	LEGISLATURE, YOU MUST SELE	CT ONE OF THE FO	LLOWING:			and the second
(a) I hereby affirm I am either a legislative district if it contain  (b) I hereby affirm I will meet th	ns all or parts of more than o	one county, <b>OR</b>	1			
of the Secretary of State in w	riting when I qualify or if I do	o not qualify.	N.			y the office
FILING FEE – FEE MUST BE PAID BEFORE		ARREST STATE	V.	- 11118		A CONTRACTOR OF STREET
Candidate Filing Fee, if applicable			is hereby submitte	d with this D	eclaration and Oath	of Candidacy.
AUDIO GUIDE - PRONUNCIATION OF BAL						arsettly comme
Contact me about my name pror						
OATH OF CANDIDACY - CANDIDATE MUS hereby affirm I possess, or will pos	sess within constitutional a	nd statutory dec	OR AN OFFICER OF TH	e OFFICE WHI	RE THIS FORM IS FILE	etion and laws of the
United States and the State of Mont	tana.		admires, the qualific	anons prese	ribed by the Constit	ation and laws of the
	MAA		1-	7 _ 3 _	22	
Signature of Candidate					Carlo	on County Elections
NOTARY PUBLIC OR AUTHORIZED OFFICE	R				Carb	off County Elections
Where to file Federal, Statewide,	State of Mon	ntana				DE 0 1 2023
State District and Legislative offices		Darbr	00			
Montana Secretary of State P.O. Box 202801		2	$\overline{}$	ne neutro	17	
State Capitol Building	worn to before n	ne this	day of	remner	, 20 <u>~</u> 5 by	
1301 E. 6th Ave, 2nd Floor, Room 260	)		al	100	1 11	
Helena, MT 59620 Online: sosmt.gov/elections/filing Fax: 406-444-2023	4		Prins	ted Name of	U DVA F	Ovich_
Where to file County, City and most Local District offices:	OTARIA:	NOTARY PL	SWEET /BLIC for the	Ens	tus XIII	10l
County Election Office A list of county election offices may	be SEAL SEAL	State of Residing at Bri	Montana Signi idger, Montana	ature of Not	ary or Public Official	1.

August 10, 2027

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