



Declaration for Nomination and Oath of Candidacy

For Office Use Only	
Date Filed:	<u>3-6-2024</u>
Fee Amount:	<u>\$15</u>
Fee Paid:	<input type="checkbox"/> Cash <input checked="" type="checkbox"/> Check <u>133</u> <input type="checkbox"/> Credit
Document #:	_____
Received By:	<u>AR</u>

SECTION 1: CANDIDATE INFORMATION

Candidate First Name: Shinta Candidate Last Name: Daniels

Filing for Office of: Council ward 3
Full name of office including district and/or department numbers, if applicable

- Democratic Party
 Libertarian Party
 Republican Party
 Green Party
 Nonpartisan
 Independent
 Minor Party: _____
Name of Minor Party

P.O. Box 1168 Red Lodge MT 59068
Mailing Address City State Zip Code
1500 S. Broadway Red Lodge MT 59068
Residential Address City State Zip Code
Carbon 406-425-3585 sdanielsward3@gmail
County of Residence Phone Email Website

SECTION 2: BALLOT INFORMATION

Candidate Name (printed exactly as it should appear on the ballot): Shinta Daniels

- Contact me about my name pronunciation (if not checked, generic phonetic pronunciation will be used for accessible voting equipment)

SECTION 3: AFFIRMATIONS

I affirm I am a registered voter in the State of Montana or will be by the candidate filing deadline. (Does not apply to Federal candidates or individuals under the age of 18 at the candidate filing deadline who will turn 18 by the election)

If filing for the State Legislature (select one):

- I affirm I am either a resident of the county in which I am a candidate, if it contains one or more legislative districts, or of the legislative district if it contains all or parts of more than one county, OR
 I affirm I will meet the residency qualification(s) in (a) above for 6 months preceding the general election and will notify the office of the Secretary of State in writing when I qualify or if I do not qualify.

Fee Payment/Statement of Indigency (select one):

- I affirm I have included the applicable nonrefundable fee with this form. OR
 I affirm I am unable to pay the filing fee set by law for the office for which I am filing, and request that my name be placed on the ballot through the Petition process without payment of the statutory fee.

Section 4: 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 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.

Shinta Daniels
Signature of Candidate

3-6-2024
Date

Notary Public or Authorized Officer

State of Montana
County of Carbon

Signed and sworn before me this 6th day of March, 2024

By Shinta Daniels
Printed Name of Candidate

[Signature]
Signature of Notary or Public Official

[Seal/Stamp]



Submit the completed form and applicable fees for Federal, Statewide, State District, and Legislative Offices to:

Montana Secretary of State · PO Box 202801 · Helena, Montana 59620-2801 or

Submit the completed form and applicable fees for County, City, and most Local District Offices to:

Local County Elections Office (list of Offices found at sosmt.gov/elections)

LORI LYNDE
CARBON COUNTY TREASURER

PO BOX 828
RED LODGE, MT. 59068

Cash Receipt: Printed 16:35:33 - 03/06/24
Operator: Jordan
Posted: 03/06/24

Batch: 26572
Transaction: 3
Received: 03/06/24 04:35:30 PM AP: 3/24

Description **Total**

Reference #: DANIELS
Name: Daniels

1000-341042	ELECTION FEES	15.00
Fund 1000	Acct 341042	

Check # 133	15.00
Cash Paid	
Credit Paid	
Less Change Given	
TOTAL:	15.00
