

## Declaration for Nomination and Oath of Candidacy

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SECTION 1: CANDIDATE INFORMATION	L		
Candidate First Name: MICAH HOTTIME	Candidate Last Nam		EMM
Filing for Office of: Precinc Commit		10 th	PRECINCT
	Republican Party		П.,
Independent Minor Party:  Name of Mi	Τ	Green Party	Nonpartisan
P.O. Box 42	,	nat	·
Mailing Address	PED LOOGE City	State	57868
414 BROADLING AVES	RED LODGE	MT	Zip Code 59868
Residential Address 717 688 47	City	State	Zip Code
County of Residence Phone	ZS MICA	H(O) HWH8S	Website
SECTION 2: BALLOT INFORMATION			
Candidate Name (printed exactly as it should appear on the b	pallot):M/CX	1H HOFF	= man
I affirm I am a registered voter in the State of N Federal candidates or individuals under the age  If filing for the State Legislature (select one):  I affirm I am either a resident of the county in w the legislative district if it contains all or parts o I affirm I will meet the residency qualification(s the office of the Secretary of State in writing wh  Fee Payment/Statement of Indigency (select one):  I affirm I have included the applicable nonrefun I affirm I am unable to pay the filing fee set by la on the ballot through the Petition process witho  Section 4: OATH OF CANDIDACY (Candidate must sign in the possess, or will possess within constitutional	of 18 at the candidate f which I am a candidate, if f more than one county, i) in (a)above for 6 mont en I qualify or if I do not dable fee with this form tw for the office for which out payment of the statu	filing deadline who we fit contains one or not the preceding the general fit of the general fit of the fit of	will turn 18 by the election) more legislative districts, or of eneral election and will notify quest that my name be placed
and laws of the United States and the State of Montana.	and statutory dedamies,	, the qualifications p	rescribed by the Constitution
Cimpature of Care dislate			3/8/2024
Signature of Candidate	Notary Public or Author	rized Officer	Date
	State of Montana County of Carbo		
ElSeal/Sianual	Signed and sworn before  By Michh  Printed Name of Candida	toffman	of march, 20 24
- G. C		Signature of Notary o	or Public Official

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)