

## Declaration for Nomination and

LING	Filed thisday of Document #	20
FOR FI	Fee paid: cash check	Credit
gu.)	Deputy or Filing Officer	

Oath of Can	didacy for the City of	Fee paid: cash check	Cred
Red Lodge	,	Deputy or Filing Officer	
DECLARATION AND OATH OF CANDIDACY TO B	BE FILED WITH SECRETARY OF STATE OR COUNTY E	FCTION ADMINISTRATOR AS ASSESSED	
Filing for	The second secon	A APPLICABLE	
office of:  Full name of office including distri	rict and/or department numbers if applicable	Name of Political Party	OR Nonpari
Candidate Name (printed exactly as it sho	ould appear on the ballot):	Stevens	
Mailing Address	City and	d State	
P.O. Box 378	C	ed bodse out	Zip Code
Residence Address	City and	, ,	59068
522 Airport Rd.	# C-5 V	Red bods 1- IDAT	Zip Code
County of Residence Conta	act Phone Email Address	7 8 001	> 7068
Carbon Co. 406		Website Address	
IF THIS DECLARATION IS FOR THE OFFICE OF GO	VERNOR, YOU MUST COMPLETE THE FOLLOWING I		
Lieutenant Governor Name (printed exactly		THE CONTRACT TOTAL ST. 20	* 47 Tue 20 6
	y as it should appear on the ballot):		
Mailing Address:	Residence	e Address:	
No. 10 Control of the	Address:	Website Address:	
	TURE, YOU MUST SELECT ONE OF THE FOLLOWING	G: 12 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
(a) I hereby affirm that I am either a res legislative district if it contains all or	sident of the county in which I am a candidate parts of more than one county, <b>OR</b>	re, if it contains one or more legislative districts	, or of the
$\square$ (b) <i>I hereby affirm</i> that I will meet the r	residency qualification(s) in (a)ahove for 6 mo	onths preceding the general election and will no	
of the Secretary of State in writing w		the general election and will no	tify the office
and the second of the second o		(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	
Candidate Filing Fee, if applicable, in the	1 . 2	by submitted with this Declaration and Oath of	Candidacy.
I hereby affirm that I possess, or will posses	N THE PRESENCE OF A NOTARY PUBLIC OR AN OF	FICER OF THE OFFICE WHERE THIS FORM IS FILED: ines, the qualifications prescribed by the Const	
the United States and the State of Montane	a.	mes, the qualifications prescribed by the Const	itution and laws o
	1	3/=12.1	
Signature of Candidate		Date	
NOTARY PUBLIC OR AUTHORIZED OFFICER			
State of Montana County of Coulon			
Signed and sworn to before me this 7 #	day of March , 20 2	4 by Lee Stevens	
		Printed Name of Candidate	
Where to file for Federal, Statewide, State District and Legislative offices:	Î	. 1	
Montana Secretary of State	Sia	Viuptupo	
State Capitol, 2 <sup>nd</sup> Floor, Room 260	Sig	gnature of Notary or Public Official	/
PO Box 202801 Helena, MT 59620-2801		Cristal Ro	VISCIA
Online: sos.mt.gov	97 Pr 20	Printed Name of Notary Publ	ic
By Fax: 406-444-2023	at the	Notary Public for the State of	
Where to file for County, City and	4.2	*,	
most Local District offices: County Election Office	The Moral	Residing at:	
A list of county election offices may	100	My commission expires:	
be found at: sos.mt.gov/elections	[SEAL/STAMP]	, commission expires:	, 20

## **LORI LYNDE CARBON COUNTY TREASURER**

PO BOX 828 RED LODGE, MT. 59068

**Cash Receipt:** 

Printed 12:43:25 - 03/07/24

Operator: Posted:

Jordan 03/07/24

Batch:

26576

Transaction:

Receipted:

03/07/24 12:43:24 PM

AP: 3/24

**Description** 

Reference #: Name:

STEVENS Stevens

Fund 1000

1000-341042 ELECTION FEES

Acct 341042

15.00

Total

Check #

**Cash Paid** 

**Credit Paid** 

**Less Change Given** 

**TOTAL:** 

15.00

15.00