



# Declaration for Nomination and Oath of Candidacy for the City of Red Lodge

FOR FILING OFFICE ONLY

Filed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_  
 Document # \_\_\_\_\_  
 Fee paid:  cash  check \_\_\_\_\_  credit  
 By: \_\_\_\_\_  
 Deputy or Filing Officer

DECLARATION AND OATH OF CANDIDACY TO BE FILED WITH SECRETARY OF STATE OR COUNTY ELECTION ADMINISTRATOR AS APPLICABLE

Filing for office of: Red Lodge City Council Ward 2  
 Full name of office including district and/or department numbers if applicable  
 \_\_\_\_\_ Name of Political Party OR  Nonpartisan

Candidate Name (printed exactly as it should appear on the ballot): Sandy Conlee

Mailing Address: P.O. Box 47 City and State: Red Lodge, MT Zip Code: 59068

Residence Address: 307 Haggin Ave. South City and State: Red Lodge, MT Zip Code: 59068

County of Residence: Carbon Contact Phone: (406) 425-1457 Email Address: mtconlees@gmail.com Website Address: none

IF THIS DECLARATION IS FOR THE OFFICE OF GOVERNOR, YOU MUST COMPLETE THE FOLLOWING INFORMATION:

Lieutenant Governor Name (printed exactly as it should appear on the ballot): \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_ Residence Address: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_ Website Address: \_\_\_\_\_

IF THIS DECLARATION IS FOR THE STATE LEGISLATURE, YOU MUST SELECT ONE OF THE FOLLOWING:

- (a) I hereby affirm that 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
- (b) I hereby affirm that 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.

FILING FEE - FEE MUST BE PAID BEFORE FILING IS VALID:

Candidate Filing Fee, if applicable, in the amount of \$ \$15 is hereby submitted with this Declaration and Oath of Candidacy.

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.

Sandy Conlee Signature of Candidate Date: 6/19/2023

NOTARY PUBLIC OR AUTHORIZED OFFICER

State of Montana  
 County of Carbon

Signed and sworn to before me this 19th day of June, 2023 by Sandy Conlee  
 Printed Name of Candidate

[Signature]  
 Signature of Notary or Public Official

**Where to file for Federal, Statewide, State District and Legislative offices:**  
 Montana Secretary of State  
 State Capitol, 2nd Floor, Room 260  
 PO Box 202801  
 Helena, MT 59620-2801  
 Online: [sos.mt.gov](http://sos.mt.gov)  
 By Fax: 406-444-2023

**Where to file for County, City and most Local District offices:**  
 County Election Office  
 A list of county election offices may be found at: [sos.mt.gov/elections](http://sos.mt.gov/elections)

[SEAL/STAMP]

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

**LORI LYNDE**  
**CARBON COUNTY TREASURER**

PO BOX 828  
RED LODGE, MT. 59068

**Cash Receipt:** Printed 08:01:45 - 06/20/23  
**Operator:** Leah  
**Posted:** 06/20/23

**Batch:** 25949  
**Transaction:** 1  
Received: 06/20/23 08:01:43 AM AP: 6/23

**Description** **Total**

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**Reference #:** CONLEE FILING FEES  
**Name:** Conlee Filing Fees

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1000-341042	ELECTION FEES	15.00
Fund 1000	Acct 341042	

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<b>Check #</b> 3140	15.00
<b>Cash Paid</b>	
<b>Credit Paid</b>	
<b>Less Change Given</b>	
<b>TOTAL:</b>	15.00

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