



# 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:

WARD 1 - CITY COUNCIL  
 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):

DOUG MILLER

Mailing Address

PO BOX 2198

City and State

RED LODGE MT

Zip Code

59068

Residence Address

814 COOPER AVE N.

City and State

RED LODGE MT

Zip Code

59068

County of Residence

CARBON

Contact Phone

281-773-2302

Email Address

RDM 386@EARTHLINK.NET

Website Address

\_\_\_\_\_

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 \$ 15.00 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.

Signature of Candidate

[Signature]

Date

6/12/23

NOTARY PUBLIC OR AUTHORIZED OFFICER:

State of Montana

County of Carbon

Signed and sworn to before me this 12<sup>th</sup> day of June

20 23

by Robert Douglas Miller

Printed Name of Candidate

Signature of Notary or Public Official

[Signature]

Printed Name of Notary Public

Notary Public for the State of \_\_\_\_\_

Residing at: \_\_\_\_\_

My commission expires: \_\_\_\_\_, 20\_\_\_\_

**Where to file for Federal, Statewide, State District and Legislative offices:**  
 Montana Secretary of State  
 State Capitol, 2<sup>nd</sup> 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]

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

PO BOX 828  
RED LODGE, MT. 59068

**Cash Receipt:** Printed 15:34:24 - 06/12/23  
**Operator:** Robert Kramer  
**Posted:** 06/12/23

**Batch:** 25924  
**Transaction:** 5

Received: 06/12/23 03:34:24 PM AP: 6/23

**Description**

Total

**Reference #:** MILLER ELEC FEE  
**Name:** Miller Elec Fee

---

1000-341042	ELECTION FEES	15.00
Fund 1000	Acct 341042	

---

---

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

---