

Write-In Candidate Declaration of Intent and Oath of Candidacy

ONLY	Filed this 1446 day of	202,2
OFFICE C	Fee paid: Cash check By: Deputy or Filing Officer	credit

	0	Deputy or Filing Officer	
DECLARATION AND OATH OF CANDIDACY TO BE FILED WITH SECRETARY OF STATE	OR ELECTION ADMINISTRATOR	AS APPLICABLE	
Filling for City Councy Frances Mt. Full name of office including district and/or dept. #s if applicable	ty Primary: Name of Party	OR Nonpa	artisan <i>or 🏻</i> General
Candidate Name: Michael J. Ventling]	
Mailing Address	City and State		Zip Code
430 E. River St.	Fromberg	M+	59029
Residence Address	City and State		Zip Code
430 E, River St.	Frambers 1	ut:	59029
County of Residence Contact Phone Email A	Address	Website Address	
Carbon 406-839-6027 Chi	romey 99 @ Vahoo.	can	
IF THIS DECLARATION IS FOR THE OFFICE OF GOVERNOR, YOU MUST COMPLETE TH	, ,		
Lieutenant Governor Name (printed exactly as it should appear on the bal	llot):		
Mailing Address:	Residence Address:		
Ph			
Phone: Email Address: IF THIS DECLARATION IS FOR THE STATE LEGISLATURE, YOU MUST SELECT ONE OF	THE FOLLOWING.	Website Address:	
 (a) I hereby affirm that I am either a resident of the county in which I legislative district if it contains all or parts of more than one county (b) I hereby affirm that I will meet the residency qualification(s) in (a) of the Secretary of State in writing when I qualify or if I do not qual FILING FEE − FEE MUST BE PAID BEFORE FILING IS VALID: 	y, OR above for 6 months preceding	-	
Candidate Filing Fee, if applicable, in the amount of \$ 15	is hereby submitted y	vith this Declaration and Oath	of Candidage
OATH OF CANDIDACY - CANDIDATE MUST SIGN IN THE PRESENCE OF A NOTARY P			
I hereby affirm that I possess, or will possess within constitutional and st			
of the United States and the State of Montana.			
Michael A. Central	7-8	3-2023	
Signature of Candidate	Date		
NOTARY PUBLIC OR AUTHORIZED OFFICER			
County of Wellbrustone Signed and sworn to before me this 15th day of July	20 <u>23</u> by <u>(</u>	lichael J. Vent	Hinor.
Where to file for Federal, Statewide, State District and Legislative offices: Montana Secretary of State State Capitol, 2 nd Floor, Room 260	Miste	tary or Public Official	
PO Box 202801 Helena, MT 59620-2801 Online: sosmt.gov	U	MiStyl. With Printed Name of Notary P	tman
By Fax: 406-444-2023	MISTY L. WITTMAN	Notary Public for the State	an Mt
Where to file for County, City and most Local District offices:	NOTARY PUBLIC for the State of Montana Residing at Laurel, Montana	Residing at:	el mt
County Election Office A list of county election offices may	My Commission Expires June 13, 2024	My commission expires:	JUDU 3 20 24



Write-In Candidate Declaration of Intent and Oath of Candidacy – Reverse

NG NE	Filed thisday of	,20
FOR FILING OFFICE ONLY	Document #	
S R	By: Deputy or Filing Officer	

	Reverse	Deputy or Filing Officer
DECLARATION AND C	OATH OF CANDIDACY TO BE FILED WITH SECRETARY OF STATE OR ELECTION ADMINISTRATOR A	S APPLICABLE
Candidate Name	e Michael J. Venthing	
IF THIS DECLARATI	TION AND OATH IS FOR THE OFFICE OF GOVERNOR, YOU MUST COMPLETE THE FOLLO	OWING INFORMATION:
Petition for Nom	mination of Lieutenant Governor: Lieutenant Governor Candidate Name	
FILING FEE AND CANI	NDIDATE CERTIFICATIONS	
boxes below:		vith this Declaration. I have checked both
filing fee required	epursuant to $\underline{13-10-211}$ (6), MCA, I understand that a declaration of intent for ed under $\underline{13-10-202}$, MCA is received by the Secretary of State or election addition serves as my declaration of acceptance of the nomination or election put	ministrator, as applicable. I further certify
	nd that pursuant to <u>13-10-211(1), MCA, a write-in candidate must file any inite</u> 's name that the candidate wishes to have counted if written in by a voter in bove.	
WRITE-IN CANDIDATI	TE DESIGNATIONS	
ballot is marked a candidate's decla i) first and ii) initials, i	10-302 and 13-15-206, MCA, a write-in vote may only be counted if the oval of and the write-in vote identifies a declared write-in candidate by any of the claration of intent which must contain: Id last name; If any, used instead of a first name, or first and middle name, and last name.	lesignations filed in the write-in
	me, if any, used instead of a first name, and the last name; and ative or diminutive name, if any, used instead of a first name, and last name:	
	art of my declaration of intent to be a write-in candidate, I am listing the follo ICA, including my last name and at least an initial, which is required by law f	
Michael	J. Ventling	
M: 6 J.	· Varofling	
Mila	Ven Hing	
Tru joe	O EN TITUS	
If additional, list l	t below:	
	* 4874 * Recording at Laure Montana My Commission Expires June 13, 2024	

LORI LYNDE CARBON COUNTY TREASURER

PO BOX 828 RED LODGE, MT. 59068

Cash Receipt:

Printed 11:39:53 - 07/14/23

Operator: Posted:

Shannon 07/14/23

Batch:

26012

Transaction:

Receipted:

07/14/23 11:39:52 AM

AP: 7/23

Description

Total

15.00

Reference #: Name:

FILING FEE/TAYLOR Filing Fee/taylor

1000-341042 ELECTION FEES

Fund 1000

Acct 341042

Check #

Cash Paid

15.00

Credit Paid

Less Change Given

TOTAL:

15.00

		E -