DECLARATION OF INTENT AND OATH OF CANDIDACY FOR TRUSTEE CANDIDATES

To the School District Clerk of School District No. <u> </u>
Filing for the office of School District Trustee: For a 3 -year term at the Annual Regular School District Election to be held on the 14 day of May, 20
Candidate Name (Print, as it should appear on the ballot): Michael R. 13:350nnette
Mailing address: 756 Clear Creek Rd
City and State: Roberts MT Zip Code: 59670
Residence address: 756 Clegr Creek Rd
City and State: Roberts MT Zip Code: 59070
Contact Phone: 406-899-2912 Email Address: Gimikey 1975 a 6 Mail. com
I hereby affirm that I possess, or will possess, within the constitutional and statutory deadlines, the qualifications prescribed by the Constitution and law of the United States and the State of Montana. DATED this 13th day of Poblugy 2034
(Signature of Candidate)
Candidate must sign and acknowledge this Declaration of Intent before a Notary Public, if mailed, or before the Election Administrator or Deputy, if delivered in person.
State of Montana, County of CACSO U
Signed and sworn to before me this BH day of February, 2024, by Michael R. Bissonnette Printed Name of Candidate
Signature of Notary or Public Official Alayre R. Oben T
Printed name of Notary or Public Official JALAYNE R. OBERT NOTARY PUBLIC for the
Notary Public for the State of Montana (include stamp/seal) State of Montana State of Montana State of Montana
Residing at: Residing at: Residing at Robert S Montana My Commission Expires
My Commission Expires: 7/15 20 25

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This Declaration of Intent for a trustee position must be submitted to the school district clerk no later

Candidate Name (Print): Michael R Bissonnette

than 40 days before the election. 20-3-305, MCA

Pursuant to 13-37-206, MCA, all candidates for trustee positions in first-class districts located in counties with populations of 15,000 or more OR in county high school districts having student enrollments of 2,000 or more must report their campaign finance activities to the Montana Commissioner of Political Practices. Current forms are available at: Link to the MT Political Practices webpage				
			Please return this form to:	
			District Clerk: JALAYNE OF	BELT
District: # 5	a section.			
Address: POBOV 78	City, State, Zip ROBENTS MTS FOX			
Fax: (06-445-250)	Fmail: oben to CORSA + KID. In T. 45			