Lewis & Clark County Elections (406) 447-8338 elections@lccountymt.gov



City-County Building 316 North Park/Room #168 Helena, MT 59623

Petition for Appointment

For the Office of				
		District for a term of years		
PETITION TO BE FILED WITH COUNTY ELECTION A	DMINISTRATOR			
Name:				
Mailing Address:				
Street or PO Box		City	Zip	
Residence Address:				
Street		City	Zip	
County of Residence:	Hama Phana:	Work Phone	٠.	
County of Residence.	nome Phone	WOLK PHOLE	e	
Fancil Address				
Email Address:				
Please list any public offices you currently hold, wh	nether they are elected or appointed:			
OATH OF QUALIFICATIONS - CANDIDATE MUST SI	GN IN THE PRESENCE OF A NOTARY PUB	LIC OR AN ELECTION ADMI	NISTRATOR/DEPUTY	
I hereby affirm that I possess, or will poss by the Montana constitution and the law		•	ialifications prescribed	
Signature of Candidate	Dat	:e		
NOTARY OR ELECTION ADMINISTRATOR/DEPUTY	,			
State of Montana County of				
Acknowledged before me thisday of _	, 20 b	OV		
	· · · · · · · · · · · · · · · · · · ·	Printed N	ame of Candidate	
	Signa	Signature of Notary or Public Official		
[SEAL/STAMP]				
	Print	ed Name of Notary Public		
	Nota	ry Public for the State of		