



# OATH OF OFFICE

STATE OF MONTANA }  
County of Richland } SS

I, \_\_\_\_\_, do solemnly swear (or affirm)  
*(Name)*

that I will support, protect and defend the constitution of the United States, and the constitution of the state of Montana, and that I will discharge the duties of my position/office on the Sidney City Council with fidelity (so help me God).  
*(Name of office/board)*

\_\_\_\_\_  
Signature

## CERTIFICATION OF OFFICER ADMINISTERING OATH

Sworn to and subscribed before me this \_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Officer Administering Oath

Title: \_\_\_\_\_

### For Office Use Only

Date of Appointment: \_\_\_\_\_ or Date of Election: 11-7-2023

Term Expiration Date: 12/31/2027