



# Petition for Recount by Candidate

Subject to 13-16-201(1)(a), (1)(b), or 13-16-211, MCA, a defeated candidate may file a verified petition stating that the candidate believes that a recount will change the result and that a recount of the votes for the office or nomination should be conducted.

FOR FILING  
OFFICE ONLY

Filed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

Document # \_\_\_\_\_

By: \_\_\_\_\_  
Deputy or Filing Officer

PETITION TO BE FILED WITH SECRETARY OF STATE  COUNTY ELECTION ADMINISTRATOR

## CERTIFICATION OF PETITION FOR RECOUNT (CANDIDATE MUST SIGN IN THE PRESENCE OF A NOTARY PUBLIC OR AN OFFICER OF THE OFFICE WHERE THE FORM IS FILED)

To the Secretary of State or County Election Administrator:

I, the undersigned candidate for the office of \_\_\_\_\_, in the \_\_\_\_\_ Election held on \_\_\_\_\_, 20 \_\_\_\_ believe that a recount of votes cast for said office will change the result and that a recount of the votes for the office or nomination should be conducted and petition for a recount of the ballots cast for said office.

\_\_\_\_\_  
Signature of Candidate

\_\_\_\_\_  
Date

### Notary Public or Authorized Officer

State of Montana

County of \_\_\_\_\_

Signed and sworn before me this \_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_

By \_\_\_\_\_

Printed Name of Candidate

\_\_\_\_\_  
Signature of Notary

[Seal/Stamp]

### FOR ELECTION OFFICE USE ONLY:

Date petition received \_\_\_\_\_ Amount of bond \_\_\_\_\_

CANDIDATE NAME VOTES RECEIVED

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

TOTAL VOTES CAST FOR THIS OFFICE: \_\_\_\_\_

# of votes difference between the winning candidate and the candidate filing this petition: \_\_\_\_\_

Percentage difference \_\_\_\_\_

*\*Take the vote difference divided by total votes cast and multiply by 100. This is the percentage difference. A recount is permitted if the percentage difference is within the limits specified in 13-16-201, MCA.*

*- In certain cases, specified in the law, the candidate must post a bond to pay the costs of the recount.*

**Submit the completed form and applicable fees for Federal, Statewide, State District, and Legislative Offices to:**

Montana Secretary of State · PO Box 202801 · Helena, Montana 59620-2801 or

**Submit the completed form and applicable fees for County, City, and most Local District Offices to:**

Local County Elections Office (list of Offices found at [sosmt.gov/elections](http://sosmt.gov/elections))