



# Project Vote Smart

NPAT Department  
One Common Ground, Philipsburg, MT 59858  
(ph) 406-859-8692 (fax) 406-859-8681

## Gubernatorial Candidate Biographical and Contact Information

Please enclose a recent photo for our web site  
Please print or type clearly.

Name \_\_\_\_\_ Sex: Male Female  
First Name Middle Initial Last Name Jr, Sr, Etc (Circle One)

Current Office: US Senate US House Governor State Senate State House State Assembly  
(Circle One)  
State \_\_\_\_\_ District \_\_\_\_\_

Date 1st elected to Current Office \_\_\_\_\_ Date Last Elected \_\_\_\_\_ Date Next Election \_\_\_\_\_

\_\_\_\_\_  
Please explain if legislator was appointed to current office or if years of service are not continuous.

Party \_\_\_\_\_

Candidate's Home City and State \_\_\_\_\_

Candidate's Birth Date \_\_\_\_\_ Candidate's Birth City and State \_\_\_\_\_

Marital Status: Married Single Divorced Widowed Other \_\_\_\_\_ Spouse's name \_\_\_\_\_  
(Circle One)

Number of Children \_\_\_\_\_ Children's names \_\_\_\_\_

Religion \_\_\_\_\_

### Education (list in chronological order starting with most recent)

Degree	Institution	Year
Degree	Institution	Year
Degree	Institution	Year
Degree	Institution	Year

### Professional Experience (Including Military) (list in chronological order starting with most recent)

Position	Company	Dates
Position	Company	Dates
Position	Company	Dates
Position	Company	Dates
Position	Company	Dates
Position	Company	Dates

**PLEASE TURN OVER**

CANDIDATE'S FULL NAME \_\_\_\_\_ Party \_\_\_\_\_

**Political Experience (Including Local Boards and Commissions)** (list in chronological order starting with most recent)

Position	Organization	Dates
Position	Organization	Dates
Position	Organization	Dates
Position	Organization	Dates
Position	Organization	Dates
Position	Organization	Dates

**Organizations (Civic or Professional Organizations)** (list in chronological order)

Position	Organization	Dates
Position	Organization	Dates
Position	Organization	Dates
Position	Organization	Dates
Position	Organization	Dates
Position	Organization	Dates
Position	Organization	Dates

**Contact Information:**

Campaign Address \_\_\_\_\_  
Street

City State Zip Code ( ) Campaign Phone ( ) Campaign Fax

Capitol Address (if incumbent) \_\_\_\_\_  
Street

City State Zip Code ( ) Capitol Phone ( ) Capitol Fax

District Address (if incumbent) \_\_\_\_\_  
Street

City State Zip Code ( ) District Phone ( ) District Fax

Campaign EMail Address \_\_\_\_\_

Campaign Web Address \_\_\_\_\_

**I have enclosed a recent photo.**

(Photos will be scanned onto our web site and cannot be returned.)

- Project Vote Smart also has an extended biographical form with additional questions. If you would like a copy of this form, please email [presidential@vote-smart.org](mailto:presidential@vote-smart.org) or call 406-859-8692