rev 1/14 ORS 249.170, ORS 249.180 ORS 249.830, ORS 255.235 Withdrawal

2014 Withdrawal Deadlines				
Primary Election May 20, 2014	General Election November 4, 2014			
March 14, 2014		August 29, 2014		
All information must be completed or the form will be rejected.				
This filing is an	iling is an 🔲 Original		☐ Amendment	
Filing Officer				
☐ Secretary of State	☐ County Elections	Official	☐ City Recorder (Auditor)
Candidate and Nominee Information				
Name of Candidate				
First	MI Last		Suffix	
Condidate Residence/Payte Address				
Candidate Residence/Route Address Street Address		City	State	Zip
- Gueer Address		Oity	State	<u>~</u> ip
Candidate Mailing Address		City	Ctata	Zin
Street Address or PO Box		City	State	Zip
Contact Information: Only one phone number is required.				
Work Phone Home Ph	one	Cell Phone	Fax	
Email Address		Web Site if applicable		
Email Address Web Site, if applicable				
Withdrawal from Candidacy or Nomination for Office Information				
Office of:				
District, Position or County:			_	
☐ Candidacy for Nomination		☐ Nomination to	Politic	cal Party
Withdrawal Reason-				
I submit notice of withdrawal from candidacy or nomination to the above named office. My reason for withdrawal is:				
By signing this document, I hereby state that:				
 → I withdraw my candidacy or nomination for the office stated above and → The reasons provided by me on this form for withdrawal are true. 				
Warning				
Supplying false information on this form may result in conviction of a felony with a fine of up to \$125,000 and/or prison for up to 5 years. (ORS 260.715).				
Candidate's Signature				Date Signed

For Office Use Only Initials