

Withdrawal of Candidate Filing Form

This is to certify that I, _____
(Name)

am withdrawing the form filed with the filing office to be a candidate for the office of

_____ at the
(Office)

_____ Election to be held on _____, _____, _____.
(Primary/General/Special) (Day) (Month) (Year)

Dated this _____, _____, _____.
(Day) (Month) (Year)

Printed Name

Signature

State of Nebraska)
) ss.
County of _____)

Subscribed in my presence and sworn to before me this _____ day of _____,
(Day) (Month)

(Year)

(Seal)

Election Official/Title or Notary Public