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**Withdrawal of Declaration of Candidacy Form**

This form must be submitted to the City Clerk's Office, 290 E Herning Avenue, no later than 4:00 p.m. on the seventh calendar day following the close of the candidacy filing period. ([WMC 4.12.070\(C\)](#))

Full Legal Name of Candidate: \_\_\_\_\_

Election: \_\_\_\_\_

I hereby withdraw my candidacy from the office marked below, and request my name be removed from the ballot.

- Mayor
- City Council, Seat \_\_\_\_\_

Certification: I certify, under penalty of perjury, that the information provided on this form is true and accurate. I do hereby swear (affirm) that I am withdrawing from candidacy and request that my name be removed from the ballot as noted above.

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

\_\_\_\_\_  
Date

Subscribed and sworn to before me on this \_\_\_\_  
day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
Notary Public  
Commission Expiration: \_\_\_\_\_

Notary Stamp