THURSTON COUNTY
WASHINGTON
SINCE 1852

Kim Wyman
AUDITOR

WITHDRAWAL OF CANDIDACY
(RCW 29A.24.131)

State of Washington)
)ss.
County of Thurston)

I, _____

of (address)_____

hereby withdraw my declaration of candidacy for the office of

_____, and request that my name

be stricken from the ballot as a candidate for said office.

Dated at Olympia, Washington, this _____ day of _____, _____
Day *Month* *Year*

_____
Signature of Candidate

Subscribed and sworn before me this _____ day of _____, _____
Day *Month* *Year*

_____
Signature of Acknowledging Official

_____
Official Title

2000 Lakeridge Drive SW, Olympia, Washington 98502-6090 VOICE (360) 786-5408
FAX (360) 786-5223 E-mail: TCauditor@co.thurston.wa.us