## CANDIDATE STATEMENT OF VOLUNTARY WITHDRAWAL

| I,              | , hereb   | y withdraw                                      | as a               | candidate    | for the    | office of   |
|-----------------|---|---|--------------------|--------------|------------|-------------|
|                 | for the   | ıe  |                    |              | election   | to be held  |
| on              | By taking this action, I und  | erstand and                                     | agree th           | nat I will n | ot run as  | a write-in  |
| candidate for   | this office, that I am ineligible to r  | eceive a cert                                   | tificate (         | of election  | for this c | office, and |
| that I will not | seek, hold, or accept election or ap  | pointment t                                     | to this o          | ffice.       |            |             |
| Further, I req  | uest and agree that the State of Ar   | zona,   |                    | [NAN         | ME OF C    | OUNTY],     |
| and the         | [NAME OF CITY/  | ГOWN]:  |                    |              |            |             |
| 2.<br>3.        | Will not print my name on the bat Will not accept a nomination pap Will not count or tabulate any vo Will not include my name in the certificate of election for this office. | er for this of<br>tes which ma<br>e election ca | ffice;<br>ay be ca |              |            |             |
| acceptance of   | y hold the State of Arizona, [NAME OF CITY/TOWN]  f this withdrawal, or from carrying or tabulate votes or include my na  | harmless for                                    | or any quest to    | action tha   | at may a   | rise from   |
|                 |   |   | Withdra            | wing Can     | didate     |             |
| State of        | ))  |   |                    |              |            |             |
| County of )     | _ /   |   |                    |              |            |             |
| Subscribed ar   | nd sworn to before me this d  | ay of   |                    | , 20         | <u>_</u> . |             |
|                 | Notary Public   |   |                    |              |            |             |
| Accepted this   | s day of, 20  | _, by   |                    |              |            | _           |
|                 |   |   | (                  | Clerk        |            |             |