**Withdrawal of Candidate**

Name, Secretary

County Name County Election Board

Address

City, Oklahoma Zip code

Dear Secretary:

This will be your authority to strike my name from the list of candidates who have filed for the office and district named below.

You are directed NOT to place my name on the official ballots as a candidate for said office.

 Yours very truly,

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Candidate’s signature

 Candidate’s name typed or printed

State of       County of      .

Subscribed to and sworn by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ before me this

 (Candidate's Name)

\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20 \_\_\_\_.

Commission number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Commission expiration date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature of Notary