**WITHDRAWAL OF CANDIDACY**
(RCW 29A.24.131)

I, _____ withdraw my
(Print Name)

candidacy for nomination to the office of:

_____
(Name of Office)

_____
(Congressional or Legislative District or other jurisdiction)

_____
(Position number, if applicable)

I understand the filing fee is not refundable.

Date: _____

Sign Here X _____