## WITHDRAWAL OF CANDIDACY

1,	(Name of Candidate) being first duly sworn, say			
that I reside at	in the City/Village of,			
County of	and State of Illinois	that I am the same	person whose name is su	bscribed
hereto in whose beha	alf nomination papers were filed for th	ne office of		,
district,	Party	/, and I hereby withdra	эw as a candidate for said o	office and
respectfully request	that my name NOT be printed	d upon the official	ballot as a candidate	for the
	Election to be held on		(date of election).	
	·		NATURE OF CANDIDATI	E
I,	) SS. ) SS. , a Notary			
whose name is sub	escribed to in the foregoing withd	rawal, appeared be	fore me in person this o	day and
Signed and sworn to	(or affirmed) by	(Name of Candida	before ate)	e me on
(insert month, day	, year)			
(SEAL)		(Nc	otary Public's Signature)	
Withdra	wal is filed with the office where ori	ginal nominating peti	tion or certificate of	

Withdrawal is filed with the office where original nominating petition or certificate of nomination was filed. Upon receipt, the local election official must issue amended certification to each election authority who prepares ballots for the political subdivision.