

# Candidate Withdrawal Forms

## Withdrawal of Declaration of Candidacy

I, \_\_\_\_\_, hereby withdraw my Declaration of Candidacy for the office of \_\_\_\_\_, of the City of Dover, and authorize the County Clerk  
**Mayor or Council Member**  
to remove my name from the ballot in the manner provided by law.

----- DO NOT SIGN BELOW UNLESS IN FRONT OF NOTARY -----

\_\_\_\_\_  
Candidate's Signature

\_\_\_\_\_  
Date

Subscribed and sworn to before me this \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

Signed: \_\_\_\_\_

Notary Public in and for the State of Idaho

Residing At: \_\_\_\_\_

My Commission Expires: \_\_\_\_\_

(Notary Seal)

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### CITY CLERK

A copy of this form must be transmitted to the County Clerk as soon as possible after it is filed.

### COUNTY CLERK

Upon receipt of this form, stamp the date and time of receipt on the front of this document.

**Deadline: Dover City Hall- Friday September 20, 2019 @4:00pm**