



# Withdrawal of Candidacy

A candidate may only withdraw from candidacy by filing with the proper filing officer a notarized statement of withdrawal no later than 5:00 p.m. on the last day to file for a primary election or no later than 85 days before the general election.

FOR FILING  
OFFICE ONLY

Filed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_

Document # \_\_\_\_\_

By: \_\_\_\_\_  
Deputy or Filing Officer

DECLARATION TO BE FILED WITH SECRETARY OF STATE OR COUNTY ELECTION ADMINISTRATOR AS APPLICABLE

I, \_\_\_\_\_, a candidate for the office of \_\_\_\_\_  
Printed Name of Candidate Printed name of office, district and/or department (if applicable)

in the \_\_\_\_\_ election, do hereby request that my name be withdrawn from said election.  
Primary or General

AFFIRMATION OF WITHDRAWAL - CANDIDATE MUST SIGN IN THE PRESENCE OF A NOTARY PUBLIC OR AN OFFICER OF THE OFFICE WHERE THIS FORM IS FILED:

*I hereby affirm that I am withdrawing my candidacy for the above-named office. Pursuant to [13-10-325](#), MCA, I understand that any filing fees I may have paid will not be refunded.*

\_\_\_\_\_  
Signature of Candidate

\_\_\_\_\_  
Date

NOTARY PUBLIC OR AUTHORIZED OFFICER

State of Montana

County of \_\_\_\_\_

Signed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_ by

\_\_\_\_\_  
Printed Name of Candidate

\_\_\_\_\_  
Signature of Notary or Public Official

[SEAL/STAMP]

**Where to file Federal, Statewide, State District and Legislative offices:**  
 Montana Secretary of State  
 P.O. Box 202801  
 State Capitol Building, 1301 E. 6<sup>th</sup> Ave  
 2<sup>nd</sup> Floor, Room 260  
 Helena, MT 59620  
 Online: [sosmt.gov/elections/filing/](http://sosmt.gov/elections/filing/)  
 Fax: 406-444-2023

**Where to file County, City and most Local District offices:**  
 County Election Office  
 A list of county election offices may be found at: [sosmt.gov/elections](http://sosmt.gov/elections)