



GOVERNMENT OF THE DISTRICT OF COLUMBIA
OFFICE OF CAMPAIGN FINANCE
WASHINGTON, D.C. 20003

STATEMENT OF CANDIDATE WITHDRAWAL

I, _____,
NAME OF CANDIDATE

solemnly swear or affirm by filing this Statement of Candidate Withdrawal that I have: (1) ceased to receive contributions or to make expenditures and I will not resume such activity; (2) paid all campaign related debts and obligations, if any; (3) exhausted all campaign related surplus funds; and (4) filed all required campaign finance reports and statements. Further, I am not involved in any enforcement, audit or litigation actions with the Office of Campaign Finance.

SIGNATURE OF CANDIDATE

Subscribed and sworn to or affirmed by me this _____ day of _____
MONTH/YEAR

My Commission Expires: _____
NOTARY PUBLIC

The Statement of Candidate Withdrawal must be filed with the Director, Office of Campaign Finance, 1015 Half Street S.E., Suite 775, Washington, D.C. 20003, in accordance with 3 DCMR §3002.11.