

**Candidate Filing
Withdrawal**

RECEIVED JUL 10 2018

Handwritten signature

SEL 150

rev 1/18 ORS 249.170, ORS 249.180
ORS 249.830, ORS 255.235

Withdrawal Deadlines

2018 Primary Election March 09, 2018	2018 General Election August 31, 2018	2019 District Election March 15, 2019
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i All information must be completed or the form will be rejected.

This filing is an Original Amendment

Filing Officer

Secretary of State County Elections Official City Recorder (Auditor)

Withdrawal from Candidacy or Nomination for Office Information

Office of: *Parks Commissioner Position 4, City of Ashland*

District, Position or County: *Ashland*

Candidacy for Nomination: Please indicate below what party or parties you are withdrawing from:

Constitution Democratic Independent Libertarian
 Pacific Green Progressive Republican Working Families

Candidate and Nominee Information

Non Partisan

Name of Candidate

First *Howard* MI *E* Last *McEwan* Suffix

Candidate Residence/Route Address

Street Address *287 Otis St* City *Ashland* State *OR* Zip *97520*

Candidate Mailing Address and Contact Information: Only one phone number and an email are required.

Street Address or PO Box City State Zip

Work Phone Home Phone Cell Phone *916-524-0555* Fax

Email Address (required) *hemcewan@icloud.com* Web Site, if applicable

Withdrawal Reason-

I submit notice of withdrawal from candidacy or nomination to the above named office. My reason for withdrawal is:

Changing to run for position 5 instead of position 4

By signing this document, I hereby state that:

- I withdraw my candidacy or nomination for the office stated above and
- The reasons provided by me on this form for withdrawal are true.



Warning

Supplying false information on this form may result in conviction of a felony with a fine of up to \$125,000 and/or prison for up to 5 years. (ORS 260.715).

Handwritten signature
Candidate's Signature

Handwritten date
Date Signed

For Office Use Only Initials _____