## Candidate Filing Withdrawal

Withdrawal Deadlines

## RECEIVED

SEL 150

AUG 1 9 2024

CITY OF BEND

rev 02/24 ORS 249,170, ORS 249,180 ORS 249,830, ORS 255,235

ADMINISTRATION 2024 Primary Election 2024 General Election 2025 District Election March 15, 2024 August 30, 2024 March 20, 2025 All information must be completed, or the form will be rejected. Withdrawal from Candidacy or Nomination for Office Information Office of: & Bend City Council District, Position or County: Withdrawal from Candidacy Withdrawai from Nomination: Please indicate below what party or parties you are withdrawing from: Constitution Democratic Independent Ubertarian Pacific Green Progressive Republican Working Families Candidate and Nominee Information Name of Candidate MI Last James N Teeter Candidate Residence/Route Address Street Address City State Bend OR 97701 Candidate Mailing Address and Contact Information: Only one phone number and an email are required. Street Address or PO Box State Isend OR 97701 Work Phone Home Phone Fax Email Address (required) Web Site, if applicable Withdrawai Keason I submit notice of withdrawal from candidacy or nomination to the above-named office. My reason for withdrawal is: Destrutes Demis trave endorsed 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. 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).

updated website 8/19/2024 lif

Candidate's Signature