

Candidate Filing Withdrawal

AUG 09 2016
3:58 p.m.

SEL 150

rev 1/16 ORS 249.170, ORS 249.180
ORS 249.830, ORS 255.235

Withdrawal Deadlines

2016 Primary Election March 11, 2016	2016 General Election September 2, 2016	2017 District Election March 16, 2017
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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: County Commissioner position #3

District, Position or County: Klamath County

Candidacy for Nomination

Nomination to

Political Party

Candidate and Nominee Information

Name of Candidate

First	MI	Last	Suffix
James	J	Bellet	

Candidate Residence/Route Address

Street Address	City	State	Zip
2346 Nile Street	Klamath Falls	Or.	97603

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

Street Address or PO Box	City	State	Zip
2346 Nile Street	Klamath Falls	Or.	97603

Work Phone	Home Phone	Cell Phone	Fax
541-883-5100			

Email Address (required)	Web Site, if applicable
jb1811@charter.net	

Withdrawal Reason-

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

Life style change, retirement

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).


Candidate's Signature

8/9/2016
Date Signed

For Office Use Only Initials _____