

Candidate Filing Withdrawal

Withdrawal Deadlines

2024 Primary Election March 15, 2024	2024 General Election August 30, 2024	2025 District Election March 20, 2025
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i All information must be completed or the form will be rejected.

This filing is an Original Amendment

Withdrawal from Candidacy or Nomination for Office Information

Office of: Clackamas County Commissioner
 District, Position or County: Position 3

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

<input type="checkbox"/> Constitution	<input type="checkbox"/> Democratic	<input type="checkbox"/> Independent	<input type="checkbox"/> Libertarian
<input type="checkbox"/> Pacific Green	<input type="checkbox"/> Progressive	<input type="checkbox"/> Republican	<input type="checkbox"/> Working Families

Candidate and Nominee Information

Name of Candidate

First	MI	Last	Suffix
Joanna	M	Harbour	

Candidate Residence/Route Address

Street Address	City	State	Zip
27812 S. Hwy 211	Estacada	OR	97023

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	Fax
503-427-1377			
Email Address (required)	Web Site, if applicable		
joanna4oregon@gmail.com	www.joannaharbour.com		

Withdrawal Reason

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

I decided to run for a different office

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).

Signature Redacted

1/9/23

Date Signed