



Form EL 19

Withdrawal of Nomination

Name of Candidate: _____

I, being a person nominated as a candidate for the office of: _____
hereby withdraw my nomination from the office of _____ for
the purpose of the election to be held on October 24, 2022 and make and subscribe the
following as my affidavit in verification of my withdrawal.

Affidavit Of Candidate

I, the undersigned candidate for the election to be held upon the date so stated above,
swear or solemnly affirm:

That set forth above is a full and proper statement of the withdrawal of my nomination
as candidate from the said office.

SWORN or affirmed before me at the City of Cornwall

this _____ day of _____, 2022. _____

Signature of candidate

Signature of commissioner, etc.

Received at the City of Cornwall, this _____ day of _____, 2022.

Signature of Returning Officer or Designate