

# Statement of Withdrawal by Judge

Office Use Only:

Complete, sign, and return this form to the Colorado Secretary of State. Please type or print legibly.

## Judge Information

Name of Judge

## Office Information

Justice of the Supreme Court

Judge of the Court of Appeals

District Judge of Judicial District #

County Judge, County of

Other:

## Office Address

Street Address

City

State

Zip Code

## Telephone & E-mail Address

Business Phone #

Extension

E-mail Address

## Signature

*I affirm that I withdraw from consideration for judicial retention. Furthermore, I certify that the information provided on this form is, to the best of my knowledge, true and correct.*

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Signature of Judicial Retention Candidate



Colorado Secretary of State

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