



THE COMMONWEALTH OF MASSACHUSETTS
CIVIL SERVICE COMMISSION
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WITHDRAWAL OF CIVIL SERVICE COMMISSION APPEAL

Case No. _____

Appellant

v.

Appointing Authority

This notice confirms the withdrawal of my appeal in the above referenced matter. I exercise my right to sign this form of my own free will.

Signature

Date

Name

Mailing Address

City, Town, Zip code

Telephone Number

Fax Number

Email Address