



To be **Cancelled** from the San Joaquin County Voter Registration list, please complete the information below and return it to our office. You will need to **print the form, sign it and mail it** to our office.

PLEASE CANCEL THE FOLLOWING SAN JOAQUIN COUNTY VOTER REGISTRATION.

Name: _____

Registered Address: _____

(In San Joaquin County) _____

DATE OF BIRTH: _____ CA DRIVERS LICENSE #: _____

Please mark one of the reasons below for cancellation.

- This person no longer resides at the address listed above
- This person is deceased.
- I do not wish to be a registered voter.*

* If selecting this reason, this form cannot be completed by anyone besides the voter being cancelled

If you are completing this form for anyone besides yourself, please specify relationship below:

RELATIONSHIP TO VOTER:

_____ Print Name: _____

SIGNATURE AND DATE: This form must be signed to be valid.

_____ Date: _____

-----For Official Use Only-----

Date Received: _____ Affidavit No: _____ Initials: _____