



## Cancel Voter Registration Form

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.

**Mail this form to:** REGISTRAR OF VOTERS, PO BOX 810, STOCKTON CA 95201

PLEASE CANCEL THE FOLLOWING SAN JOAQUIN COUNTY VOTER REGISTRATION.

FULL NAME: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ LAST 4 OF SOCIAL SECURITY #: \_\_\_\_\_

CA DRIVERS LICENSE or ID #: \_\_\_\_\_

REGISTERED ADDRESS: \_\_\_\_\_  
(In San Joaquin County) Street Address (No Mailing or PO Boxes)

\_\_\_\_\_  
City

\_\_\_\_\_  
ZIP

**Please select 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:** \_\_\_\_\_

\_\_\_\_\_  
**SIGNATURE** This form must be signed to be valid.

\_\_\_\_\_  
**DATE**

-----For Official Use only -----

Date received: \_\_\_\_\_ Affidavit No: \_\_\_\_\_ Initials: \_\_\_\_\_

*Revised: 3/2019*