Wake County Board of Elections PO Box 695 Raleigh, NC 27602

PHONE: 919-404-4040 voter@wakegov.com

Middle Name

FAX: 919-231-5737

Suffix

PURPOSE

This form is intended to provide notification of a voter's request to cancel his or her Wake County voter registration. Upon submission of this form, the county board of elections will *remove* the voter from the county's list of registered voters. This form may be completed only by the voter.

INSTRUCTIONS

Voter Information

Last Name

Complete this form as thoroughly as possible. Requested information will be used to ensure that we have the correct voter. Sign the form and then submit it to the county board of elections office in the county in which the voter is registered.

I certify that I have moved out of Wake County and/or no longer wish to remain a registered voter of the county. I am requesting that my name be removed from Wake County voter registration records.

First Name

Date of Birth (MM/DD/YYYY)	Age	Gender	Last 4 Digits of SSN	Driver License	or ID No.	Voter Registration Number	(if known)
		Male					
		Femal					
Voter Registration Address							
City				State	County		
By signing below, your name will be removed from the Wake County voter registration records.							
27 2.86 22.2, 722							
Signature							
X							
Signature (Required)				Date Signed			

FRAUDULENTLY OR FALSELY COMPLETING THIS FORM IS A CLASS I FELONY UNDER CHAPTER 163 OF THE NC GENERAL STATUTES THANK YOU FOR PROVIDING THIS INFORMATION.

Send Form To:

Wake County Board of Election PO Box 695 Raleigh, NC 27602

Fax: (919)-231-5737

voter@wakegov.com