

CANCELLATION OF VOTER REGISTRATION NORTH CAROLINA FOR CHATHAM COUNTY, NC

CHATHAM COUNTY BOARD OF ELECTIONS P. O. BOX 101 Pittsboro, NC 27312

PHONE: 919-545-8500 FAX: 919-542-6430 CHATHAM.boe@ncsbe.gov

PURPOSE

This form is intended to provide notification of a voter's request to cancel his or her voter registration. Upon submission of this form, the appropriate county board of elections will remove the voter from the county's list of registered voters. Requested information will only be used to ensure that we are removing the correct voter.

INSTRUCTIONS

This form can **only** be completed by the voter. Voter should complete form as thoroughly as possible. Sign the form and then submit (*mail, fax, or scan & email*) it to the county board of elections office in the county in which the voter is registered.

Voter Information									
Last Name (Required)			First Name (Required)				Middle Name		Suffix
Date of Birth (Required) (MM/DD/YYYY)	Age	☐ Male		Last 4 Digits of SSN		Driver License or ID No.		Voter Registration Number (if known)	
	J		nale			<u> </u>			
Voter Registration Address (Required)									
City (Required)			State	e Zip Code		County (in which you were last registered)			
				NC					
By signing this form, I give the county board of elections consent to cancel my voter registration record.									
Signature									
X									
Signature (Required)					Date Signed				
FRAUDLENTLY OR FALSE	LY COMPLETIN	NG TH	IS FOR	M IS A CLASS I	FELO	NY UNDER CH	HAPTER 16	3 OF THE NC GENERAL STA	TUTES.

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Thank you for providing this information.

Send Form To: