

VOTER ACTION REQUEST FORM

Instructions:

1. **Complete the Voter Information Box.** *All information **must** be provided, or your request will not be processed. Please print clearly and sign the form.*
2. If you are requesting an action for another voter, please provide **their information in the Voter Information Box AND complete the information requested below.**
3. *This form is **NOT** for **name change or party change.** You **MUST** reregister.*

Voter Information (Please print):

Name: _____ Birth Date: ____ / ____ / _____

Registered Address: _____
(street number, street name, city, zip)

Signature: _____

NOTE: Electronic submission requires your birth date and Driver's License number for verification purposes.

NOTE: YOUR REQUEST WILL NOT BE PROCESSED IF THE ABOVE INFORMATION IS NOT PROVIDED.

Please correct registration:

My name is misspelled, please correct: _____

★ How did we misspell your name? _____

A NAME CHANGE is not a CORRECTION. If your name has **CHANGED**, you **must** reregister.

I have moved to the following **residence** address: _____

Street number, street name, city, zip

If you have **MOVED FROM OR TO ANOTHER COUNTY**, you must reregister.

My **mailing** address has changed to: _____

Has your residence address changed? If so, please give us that information!

Permanent Vote By Mail (formerly Absentee Voting):

I want to be a Permanent Vote By Mail Voter.

I do not want to be a Permanent Vote By Mail Voter.

Preferred Language. I want my voting materials in the language selected:

English Chinese Spanish Tagalog Vietnamese

Note: All voters will receive voting materials in English **and** their selected language, if different.

Please cancel registration:

Please cancel my registration. Reason: _____

Voter named above is deceased.

★ *If reporting a deceased voter, please write the information for the deceased voter above and complete the following:*

Name of person reporting death: _____ Phone #: _____