



## Request for Voter Registration Cancellation

The election administrator shall cancel the registration for an elector if the elector submits a written request for cancellation (13-2-402, MCA)

NAME: \_\_\_\_\_  
(Last) (First) (MI)

Date of Birth: \_\_\_\_\_

Park County Address: \_\_\_\_\_

MT drivers licence number or last 4 of SSN:

\_\_\_\_\_

Reason for Cancellation:

- Moved out of State
- Moved out of County
- Request for Removal
- Other

I do hereby request my name be removed from the voter registration records of Park County.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please return to: 414 East Callender St, Livingston MT 59047 or [elections@parkcounty.org](mailto:elections@parkcounty.org)