PURPOSE
This form is intended to provide notification of a voter’s request to cancel his or her Brunswick 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
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 Brunswick County and/or no longer wish to remain a registered voter of the county. I am requesting that my name be removed from Brunswick County voter registration records.

Voter Information

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>Middle Name</th>
<th>Suffix</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</table>

<table>
<thead>
<tr>
<th>Date of Birth (MM/DD/YYYY)</th>
<th>Age</th>
<th>Gender</th>
<th>Last 4 Digits of SSN</th>
<th>Driver License or ID No.</th>
<th>Voter Registration Number (if known)</th>
</tr>
</thead>
<tbody>
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<table>
<thead>
<tr>
<th>Voter Registration Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>City</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>State</th>
<th>County</th>
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</table>

By signing below, your name will be removed from the Brunswick County voter registration records.

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:
Brunswick County Board of Elections
PO Box 2
Bolivia, NC 28422
Fax: 910-253-2618 elections@brunswickcountync.gov