Voter Cancellation Form



I wish to cancel my Oregon voter registration in Multnomah County because I:

- Moved out of state
- No longer want to be registered or vote in Oregon
- Other

Personal Information - all information is required

Last Name	First		Middle
Oregon residence address		City	Zip Code
Date of Birth (month/day/year)			
Signature			Date
(Signature required.)			
Optional information - in case	we have trouble locatir	ng your regis	tration record
		0, 0	
Email			Phone
Form may be submitted by ma	ail, fax or email attach	ment	
Please send this completed for	orm to:		
Mail:	Fax:		Email:
Multnomah County Elections 1040 SE Morrison St. Portland, OR 97214	503.988.371	9	elections@multco.us

If you need assistance or have any questions, please feel free to call us at 503.988.VOTE (8683). Please note: Signature that matches your voter registration signature is required. Please print and sign this form before returning the completed form.