



Request for Cancellation of Voter Registration By Voter

Please complete the entire form and mail to;

Snohomish County Elections
3000 Rockefeller Ave M/S 505
Everett WA 98201

OR email to;

elections@snoco.org

Cancellation of your Voter Registration

WAC 434-324-111 – A voter may cancel his or her own voter registration by submitting a signed written notification to the auditor for the county in which he or she is registered to vote. Prior to cancellation of such registration record, the auditor must ensure the signature on the notification matches the signature in the voter registration file.

Please Print Below

Name _____

Street address _____

City _____

Date of birth _____

Phone Number _____

Certification

I hereby declare, under penalty of perjury, that I am the registered voter above and I request to be removed from the Snohomish County registration rolls:

Signature & Date

Note; Power of attorney is not an acceptable method for signing this form. If a voter is unable to sign his or her signature above, the voter shall make a mark or attempted signature on the line provided for the voter’s signature. For this form to be processed, two other persons must witness the attempted signature.

Witness Certification; Only if the voter is unable to sign above.

I witness the voter, whose names appears above on this form, make a mark or attempted signature on the line above. I certify, under penalty of perjury under the laws of the State of Washington, that the foregoing is true and correct.

(1) Witness _____
Signature & Date

(2) Witness _____
Signature & Date

If you have questions concerning the cancellation process, please contact Snohomish County Elections at 425-388-3444 or elections@snoco.org