

ULSTER COUNTY BOARD OF ELECTIONS

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Commissioner

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Deputy Commissioner

845-334-5423

AUTHORIZATION TO CANCEL REGISTRATION STATUS

By submitting this form, I am requesting the following:

- I wish to cancel my registration and be removed from the voter rolls.
- I understand I will need to submit a new registration if I would like to be registered in the future.

ALL sections below must be complete, in order for your request to be processed.

Print Name: _____

Date of Birth: _____

Address: _____

Signature: _____ Date: _____