

**Voter Cancellation Form**

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

 Moved out of state

 No longer want to be registered to vote in Oregon

 Other

**Personal Information** – all information is required

Last Name First Name Middle

Oregon Residence Address City Zip Code

Date of Birth (Month/Day/Year)

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

NOTE: This form may be submitted by email, mail or fax. No digital signatures.

**Please send completed form to:**

Crook County Clerk’s Office Elections
300 NE Third St, Rm 23
Prineville, OR 97754

Email: elections@co.crook.or.us

Fax: (541) 416-2145

If you need assistance or have any questions, please call the Crook County Elections office at (541) 447-6553.