



LOS ANGELES COUNTY REGISTRAR-RECORDER/COUNTY CLERK

DEAN C. LOGAN

Registrar-Recorder/County Clerk

Request Voter Registration Cancellation

In order to process your request for Cancellation of Voter Registration, please provide the information below.

Name:

First

Last

MI

Registered
Resident Address:

Date of Birth:

Reason:

Non-Citizen, Out of County, etc.

Telephone Number:

Signature:

Date:

Print and send to our office at the following address:

REGISTRAR-RECORDER/COUNTY CLERK
P.O. BOX 30450
LOS ANGELES, CA 90030-0450

Via Fax: (562) 864-6786

Office Use: VID: _____ Date: _____ Intl: _____