

### Voter Registry List Removal Form

LAST NAME	FIRST NAME	MIDDLE INITIAL	Jr. Sr. II III IV
DATE OF BIRTH (MM/DD/YYYY)	REMOVAL REASON (CHECK ONE) __ MOVED __ OTHER: _____		
CURRENT ADDRESS No., Street, Apt. # _____ Town, State, Zip _____			
IF YOU MOVED OUT OF REDDING, LIST THE ADDRESS ON YOUR REDDING VOTER REGISTRATION No., Street, Apt. # _____ Town, State, Zip _____			

**Statement Requesting Removal of Voter Registration**

I hereby request to have my name removed from the Voter Registry List. I understand that I will not be permitted to vote in Redding, CT unless I re-register.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

MAIL TO: Registrar of Voters, PO Box 1028, Redding, CT 06875

THIS SECTION COMPLETED ONLY BY REGISTRAR OF VOTERS

Date Received by Registrar:	Registrar Initial:
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