

Cancel Voter Registration Form



If you are currently registered to vote in the State Michigan, you may cancel your voter registration by using this form. You can mail or hand deliver your signed form to your Clerks Office (contact information is available by phone or online at www.vernontwp-mi.gov).

Your name as listed on your Michigan voter registration

Last name (required)

First name (required)

Middle name

Birthdate (required) (MM/DD/YYYY) _____

Your Michigan residence address as shown on your last voter registration card

Street address (No P.O. Box)

Apt or Unit

State

Zip Code

Sign or mark below

Affirmation: I affirm that the voter registration information provided above is true and accurate and I hereby request cancellation of my Michigan voter registration, effective the date that this form is received by the Clerk's Office. I understand that I will no longer be eligible to vote in the State of Michigan unless I register to vote again.

**SIGN HERE
PLEASE!** 

Signature (required)

Date (required)

Witness Signature (required)

Date (required)

Official Use Only By Clerk's Office

Received Date _____ Received by _____