Voter Registry List Removal Form

LAST NAME	FIRST NAME		MIDDLE INITIAL	Jr. Sr. II III IV
DATE OF BIRTH (MM/DD/YYYY)	REMOVAL RE	EASON (CHECK ONE)		1
	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		