

Request To Cancel Voter Registration

To the Harris County Elections Administrator:

Please cancel my voter registration in Harris County, Texas.

The following is the information printed on my voter registration certificate:

Name:______VUID / Voter ID Number (Optional): _____

Address:

I understand that the following information is necessary for the Harris County Voter Registrar to properly identify my records to cancel my voter registration:

Date of birth (mm/dd/yyyy):______Texas Driver's License or Personal I.D. (Optional): _____

If no TDL or PID, the last 4 digits of my Social Security number, (Optional):

I understand that cancellation of my voter registration will not necessarily exclude me from the jury summons process and does not disgualify me to serve as a juror in the county of my residence.

Signature of voter canceling voter registration in Harris County or	
printed name of voter and relationship to the voter, if signed by a witnes	S

Instructions for witness:

If the person required to sign this document cannot sign their name because of physical disability or illiteracy, they must affix their mark to the document and a witness must attest the mark.

If the person cannot make their mark, the witness shall check here

Submit completed form by mail to:

Harris County Elections Administrator's Office 1001 Preston Suite 200 Houston, Texas 77002

or by: Email: PublicInfoRequest@vote.hctx.net Fax to: 713-368-2309

VR-RCVR

Date