

FRONT

4 X 6

Place
Stamp
Here

(County Clerk or Board of Election Commissioner)

BACK

4 X 6

AFFIDAVIT OF CANCELLATION OR TRANSFER OF PREVIOUS REGISTRATION

To the Election Authority _____
(County Clerk or Board of Election Commissioners)
County of _____ City of _____, Illinois

This is to certify that I am registered in your _____ and that my
(County or City)
residence was _____.

(1) Having moved out of your _____, I hereby authorize you to cancel
(County or City)
the registration in your office; or (2) Having moved to another address in your
_____, which is _____, I hereby
(County or City) (New Address)
authorize you to transfer my registration.

Dated at _____ Illinois, _____
(insert month, day, year)

(Print Name Here) (Signature of Voter)

Attest: _____, Election Authority
County of _____ City of _____, Illinois