Voter Removal Form

This is a request to be **removed** from the FL. Voter Registration System.

Required: Name:		
Required: Date of Birth:		
Address:		_
City:	Zip:	
Day Phone:		
Mailing:		
Required: Signature:		
For information on how to register to vo Commission's website at: www.eac.gov/vo	ote in your new jurisdiction, please refer to thoter	ne U.S. Elections Assistance
Upon completion, deliver to the elec	ction office by either:	
Fax to: (305) 292-3406		
Email to: info@keys-elections.org		
Mail to: Supervisor of Election 530 Whitehead St. #101 Key West, FL 33040-6577		
Sincerely,		
R. Joyce Griffin Supervisor of Elections		

Phones: Key West (305) 292-3416 Marathon (305) 289-6017 Key Largo (305) 453-8740