

P.O. Box 1188, Tahlequah, OK 74465-1188 Phone: 918-458-5899 Fax: 918-458-6101

## CANCELLATION OF REGISTRATION OF DECEASED VOTER

Instructions: This form is to be used only by the Next of Kin of a registered voter in your precinct who is deceased. It must be signed by both the Precinct Official or authorized Election Commission staff and the next of kin. All information other than the signature should be <u>printed</u> on the form.

I, the undersigned, do hereby swear or affirm that I am the Next of Kin of:

Name of Deceased Voter				
Birthdate of Deceased Voter			Date of Death	
Blue Card/ Registry Number of I	Deceased Voter			
Address of Deceased Voter	City	State	Zip code	
Who is shown to be a qualified v	oter in <b>District</b>		, and <b>Precinct</b>	
I further swear or affirm that the voter registration records in their		is deceased	and may be removed from the	
Signature of Next of Kin	Relationship		Date	
Phone Number				
Signature of Precinct Official	Title		Date	
Election Commission	Title		Date	