

REQUEST TO CANCEL VOTER REGISTRATION STORY COUNTY, IOWA

ID Number

Provide your Iowa driver's license, non-operator ID number, or the last 4 digits of your Social Security number if you have one.

- IA driver's license #: _____
- IA non-operator ID #: _____
- Last 4 digits of Social Security number: XXX – XX – _____
- I do not have an IA driver's license, non-operator ID, or Social Security number.

Additional Information

Date of birth and gender are required.

Date of Birth (month, day, year) _____ / _____ / _____
 Sex Male Female

Your Name Last _____
 First _____

Middle _____ Suffix _____

Most Recent Story County Registration Address

Street Address _____
 (include apt., lot, etc.)
 City _____ Zip _____
 If homeless or you did not have an established residence, describe where you reside:

Voter Affidavit

I hereby request that my voter registration in Story County, Iowa, be cancelled. I affirm that the information I have provided is accurate to the best of my knowledge.

Signature _____

Date _____

Cancellation Request

Step 3: Tape Here

Place 1st Class stamp here.
 Post Office will not deliver without proper postage.

**LUCY MARTIN, STORY COUNTY AUDITOR
 AND COMMISSIONER OF ELECTIONS
 900 6TH ST
 NEVADA IA 50201**

Step 2: Fold Here

Step 1: Fold Here

Step 4: Tape Here