

Voter Registration Cancellation Request Form

If you are currently registered to vote in Maricopa County, you may cancel your voter registration by using this form.

Voter Information *(All information required)*

Legal Full Name:

The name you were registered with in Maricopa County.

Residential Address:

The address you were formerly registered at within Maricopa County.

Number and Street Name (P.O. Box is not accepted)

City

State

Zip Code

Date of Birth:

Month / Day / Year

Birthplace:

Identifying Information *(Only one required)*

**Voter Identification
Number**

OR

**AZ Driver's License
or ID Number**

OR

**Last four digits of Social
Security Number**

Read, Sign, and Return

I affirm that the voter registration information provided above is true and accurate. I hereby request cancellation of my voter registration and removal from the voter registration file, effective the date that this form is received by the Maricopa County Recorder's Office. I understand that I will no longer be eligible to vote in Maricopa County unless I register to vote again.

Signature:

Required

X

Date:

Required

Note: A digital signature or power of attorney is not valid for use by a person in any procedure or transaction concerning elections.



Return by mail:

301 W Jefferson St, Suite 705
Phoenix AZ 85003-2184



Return by email:

VoterInfo@maricopa.gov



Questions?

Call 602-506-1511 or
email VoterInfo@maricopa.gov