



PARTY AFFILIATION CHANGE FORM

License #: _____

Name: _____
(Print)

Address:

I hereby request that my political party registration be changed as follows:

FROM: Democrat [] Republican [] Undeclared []

TO: Democrat [] Republican [] Undeclared []

Signed under the pains and penalties of perjury.

SIGN NAME: _____ **DATE:** _____

For Supervisor Use Only

VOTER ID #: _____