Affidavit for Voter Registration Cancellation of Deceased Voter

1 Deceased Voter Information

Last Name: ___________________________ Suffix: _________
First Name: ___________________ Middle Name: ________________
Previous Name: ________________
Street Address: ___________________________
City/State/Zip: ___________________________
Date of Birth: ________________ Date of Death: ________________
Place of Death: ___________________________

2 Person Reporting Death

First Name: ___________________ MI: _____ Last Name: ________________

Relationship to Voter:  □ Parent  □ Legal Guardian  □ Child  □ Sibling  □ Spouse

3 Oath

I hereby declare, under penalty of perjury, that according to my personal knowledge and belief that the voter written above is deceased and should be removed from the registration rolls of ____________________________ County, West Virginia.

__________________________________________________________
Signature

__________________________________________________________
Date

4 Return

Please return this form by mail or in person to your county clerk.

(Notary Public use only)

State of ________________, County of ________________

Subscribed and sworn before me this ____________________________
day of ____________________________, 20__________.

__________________________________________________________
Signature of Notary Public

My Commission Expires ____________________________

Revised 8/1/2023