



## 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 \_\_\_\_\_

