



1898 E. Burleigh Blvd. • P.O. Box 457 • Tavares, FL 32778 P 352-343-9734 F 352-343-3605 E
Hays@lakevotes.com

REMOVAL OF NAME REQUEST
F.S. 98.045 (2) (A)

I, _____ a registered elector
of Lake County, hereby request my name to be removed from the registration
books.

Date of Birth

Signature of Voter

Date

New Address

City/State/Zip

For Official Use Only: Voter Registration#

Old Address

City/State/Zip

This is to certify that the name of the aforesaid elector has been removed from the
registration books as requested.

Supervisor/Deputy Supervisor of Elections

_____/_____/_____
(date)