



COUNTY OF LAKE
REGISTRAR OF VOTERS OFFICE

325 N FORBES ST
LAKEPORT, CA 95453
(707)263-2372
elections@lakecountyca.gov

NOTICE OF DECEASED VOTER

(TO BE COMPLETED BY "IMMEDIATE" FAMILY MEMBER ONLY)

REGARDING:

NAME: _____

ADDRESS _____

BIRTHDATE: _____

AFFIDAVIT #: _____

(OFFICE USE ONLY)

THE VOTER LISTED ABOVE SHOULD BE REMOVED FROM THE VOTER RECORDS, DUE TO THEIR DEATH.

DATE OF DEATH: _____

PLACE OF DEATH: _____

SIGNATURE

ADDRESS

PRINTED NAME

CITY/TOWN **STATE** **ZIP**

RELATIONSHIP TO THE DECEASED

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PHONE NUMBER

DATE

****PLEASE COMPLETE THIS FORM AND RETURN TO THE REGISTRAR OF VOTERS OFFICE IN THE BUSINESS ENVELOPE PROVIDED****