

ELECTIONS OFFICE
200 WEST BROADWAY
MISSOULA MT 59802-4292
PHONE: (406) 258-4751

ABSENTEE CANCELLATION REQUEST

Name: _____
Last First Middle

Date of Birth: _____

Residential Address: _____

Mailing Address: _____

I hereby request to have my name removed from absentee voting. I wish to vote at the polls:

*Signature _____ Date _____

**This form will only remove a voter from the absentee list. It WILL NOT cancel your voter registration.*

Please complete and return to:

Missoula County Elections 200 W Broadway Missoula, MT 59802	Phone: (406) 258-4751 Fax: (406) 258-3913 Email: electioninfo@missoulacounty.us
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