John Arntz, Director

Request to Cancel Voter Registration

Only the voter may cancel a voter registration record. To cancel your San Francisco voter registration record, complete, sign, and return this form to the Department of Elections, or visit *sfelections.org* to complete, print, sign, and return a cancellation request.

Please allow the Department 3-5 business days to process your request. To confirm the cancellation, visit *sfelections.org/reglookup* or contact us.

To ensure that we can identify your voter record, please provide the information below, sign, and return this form:

Print name: First name	Middle name	La	ast name	
Date of birth: MM / DD / YYYY				
			San Francisco, C	A
Residential address where registered		Apartment number		ZIP code
Mailing address (if different)				
California driver license or identification number (If you do not have one, provide last four digits of Social Security Number)				
Phone or email (please provide in case we must contact you about this request)				
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Sign here			D	ate

Return this form:

Email: sfvote@sfgov.org (use subject line: Cancellation Request)

Fax: (415) 554-4372

Mail: Department of Elections

1 Dr. Carlton B. Goodlett Place

City Hall, Room 48 San Francisco, CA 94102

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