

# Remove from Voter Rolls Request Form



I, \_\_\_\_\_, request to be removed from the Indian River County voter registration rolls effective immediately, per Florida Statute 98.045.

My date of birth is: \_\_\_\_\_

My Indian River County address is/was:  
\_\_\_\_\_

My full Florida Driver's License / ID card number or the last four digits of my Social Security number:  
\_\_\_\_\_

My voter registration number is:  
\_\_\_\_\_ (optional)

I hereby authorize the cancellation of my registration by the Indian River County Supervisor of Elections Office.  
This letter shall serve as signed proof of my request.

Signature of voter: \_\_\_\_\_

Date: \_\_\_\_\_

Please return completed form to:  
Leslie R. Swan  
Indian River County Supervisor of Elections  
4375 43<sup>rd</sup> Avenue, Vero Beach, FL 32967  
votebymail@voteindianriver.gov