

District of Columbia Board of Elections

**NOTIFICATION OF DECEASED REGISTRANT**

You may provide notice that a registered voter is deceased by completing and signing this form and returning it by mail or in person to the District of Columbia Board of Elections at 1015 Half St SE, Suite 750, Washington, DC 20003.

Full Name of Deceased Voter: \_\_\_\_\_

\_\_\_\_\_  
Address on Decedent's Voter Record

\_\_\_\_\_  
Zip code

\_\_\_\_\_  
Deceased Voter's Date of Birth

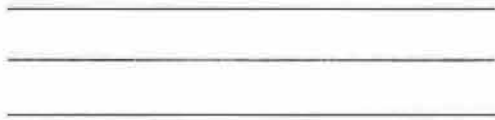
I, \_\_\_\_\_ hereby request that the name of the deceased voter listed above be removed from the voter registration records of the District of Columbia.

\_\_\_\_\_  
Your Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Your Phone Number

**\*I understand that the Board is required to send written notice of cancellation to the address on the decedent's voter record pursuant to 3 DCMR §520.2.**



Place  
Postage  
Here



District of Columbia  
Board of Elections  
1015 Half St SE, Suite 750  
Washington, DC 20003