

## NOTIFICATION OF DECEASED VOTER

**North Carolina** 

Clay County Board of Elections 54 Church St Hayesville, NC 28904

PHONE: 828-389-6812 elections@claync.org

FAX: 828-389-3757

## **PURPOSE**

This form is intended to provide notification of the death of a North Carolina registered voter to a county board of elections. Upon confirmation of the voter, the county board of elections will *remove* the voter from the county's list of registered voters. This form may only be completed by a near relative or personal representative of the deceased voter's estate.

## **INSTRUCTIONS**

Complete this form as thoroughly as possible. Requested information will be used to ensure that we have the correct voter. Sign the form and then submit (*mail, fax, or scan & email*) it to the county board of elections office in the county in which the deceased voter lived prior to death. Contact information for the county boards of elections is available at: <a href="www.ncsbe.gov">www.ncsbe.gov</a>.

Deceased Voter Information									
Last Name			First Name			Middle Name		Suffix	
Date of Birth (MM/DD/YYYY) Age Gender			Last 4 Digits of SSN Driver License			or ID No.   1	Votor Posistration Number	(if known)	
Date of Birth (MM/DD/YYYY) Age Ge			Male Last 4 Dig		its of 33N   Driver License o		No. Voter Registration Number (if known)		
		Female							
Voter Registration Address					Last Known Address (If different than voter registration address)				
City State County		County		City		State County			
County of Posistration   Data of Dooth ('fluory)				County of Dooth (if Impare)			State of Dooth (if Impum)		
County of Registration Date of Death (if kno			known)	County of Death (if known)			State of Death (if known)		
Person Providing Deceased Voter Information									
Full Name Relationship to voter: (Required, please check one)									
					North Carolina law defines a "Near Relative" as:				
Address				spouse sibling parent stepparent child stepchild grandchild grandparent					
					'			parent	
City State Zip Code				mother/father/daughter/or son in-law Legal guardian					
					Representative of estate				
Signature					<u> </u>				
X									
Signature (Required)					Date Signed				
Thank you for providing this information.									
Send Form To:									
CLAY COUNTY BOARD OF ELECTIONS					Attach Registration List Label Here				
54 Church St Hayesville, NC 28904				Atta	en negistit	ACION LIST FAMEL HELE			
P: [828]-389-6812 F: [828]-389-375 elections@claync.org			57				(If applicable)		
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