REQUEST TO CANCEL VOTER REGISTRATION

| I, Jour Lynn Ches' Me Into Sh wish to have my name removed fro 1183585 4135 RI, voter's signature | no longer desire to be a registered voter of County, Oklahoma, and hereby swear or affirm that I m the registration rolls. My residence address is My date of birth is \(\frac{2}{74432} \) \[\frac{4}{2} \] \[\frac{4}{2} \] \[\frac{4}{2} \] \[\frac{2}{2} \] \[\frac{4}{2} \] \[\frac{2}{2} \] \[\frac{4}{2} \] \[\frac{2}{2} \] \[\frac{4}{2} \] \[\frac{4}{2 |
|---|--|
| This form either must be witnessed | d by two persons or notarized as indicated below. |
| WITNESS ATTESTATION (If not notarized below) | |
| This form was signed in our presence on | by (date) (voter's printed name) |
| FIRST WITNESS: | SECOND WITNESS: |
| (printed name) | Janelle Metright |
| (printed name) | (printed name) |
| Kay Robbins Wall | Jan 18 |
| (signature) | (signature) |
| 501 Forcest Avenue | 301 Forest |
| (street address) | (street address) |
| Eufaula, OK 74432 | Engand ~ (1) 2 74432 (city, state, ZIP) |
| (city, state, ZIP) | (city, state, ZIP) |
| | |
| NOTARIZATION (If not witnessed above) | |
| State of Oklahoma | County of |
| Signed and attested before me on | by (date) (name) |
| | (date) (name) |
| | , Notary Public |
| | My commission expires: |
| | My commission number: |