REQUEST TO REMOVE SIGNATURE FROM PETITION

All fields required. A voter may <u>not</u> submit this form by email or other electronic means.

Name:
Address (resident address at which the voter is registered to vote):
Title of Petition:

Last four digits of social security:	Driver license or identification card number:

In pursuance of UCA 20A-7-205, I hereby request my signature be removed from the petition named above. I understand that this completed form must be received by the county clerk no later than May 15* before the general election in order for my signature to be removed.

_____
(Signature of voter)

*Deadlines falling on a Saturday, Sunday, or legal   Date Received
   holiday are extended to the next business day