

**OHIO VOTER REGISTRATION CANCELLATION REQUEST**

R.C. 3503.21

I hereby request the cancellation of my voter registration in the State of Ohio,  
County of \_\_\_\_\_, the City, Township or Village of  
\_\_\_\_\_, Precinct \_\_\_\_\_. My registration  
address on file with the \_\_\_\_\_ county board of  
elections is:

House number and street:
City, Village, Township:
Zip Code:
Print Name:
<b>Signature:</b>
Date:

The filing of this request does not prohibit you from reregistering to vote at any  
time in the future.

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Form No. 10-A Prescribed by Secretary of State (03-10)

(To qualify for post card rates, a card may not be larger than 4 ¼ by 6 inches by 0.0095  
inch thick and not smaller than 3 ½ by 5 inches by 0.007 inch thick.)

*(Reverse Side)*

From:

Place Correct  
Postage Here

\_\_\_\_\_ County Board of Elections

\_\_\_\_\_

\_\_\_\_\_, Ohio \_\_\_\_\_