



*William "Scott" Hoen*

## Carson City Clerk-Recorder

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### Request for Removal from Voting Records

**You may only cancel your own registration.** You cannot cancel another voter's registration (relative, friend, neighbor, ect.)

First Name \_\_\_\_\_

Last Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

Last 4 Digits Social Security Number \_\_\_\_\_

Registrant ID \_\_\_\_\_

Driver's License # \_\_\_\_\_

Current Residential Address \_\_\_\_\_

Reason for Request \_\_\_\_\_

Date of Submission \_\_\_\_\_

Signature \_\_\_\_\_

#### How to Submit Your Request:

**Mail and In-Person:** 885 E. Musser St., Suite 1025 Carson City, NV 89701

**E-mail:** [Elections@carson.org](mailto:Elections@carson.org)