



Electoral Commission

APPLICATION FOR DEREGISTRATION AS A VOTER (Regulation 4)

I hereby apply to be deregistered as a voter and have my name removed from the voters' roll:

ID number:

Surname

Names

Postal Address

Postal Code

Date
day month year

I confirm that the information contained herein is correct.

Signature, Mark of
Left Thumb Print
(made in the presence of
the registration officer)

OFFICIAL USE ONLY

For use with fingerprint only
Which finger's print was taken?

Voting District

Date processed

day month year

Signature of official?

Signature of registration official