

Voter's Name (please print): _____

VOTER REGISTRATION TRANSFER

***** You must currently be registered in Clinton County *****

Previous Name (if applicable): _____

Old Address: _____ City: _____ Zip: _____

PO Box: _____

(Please include PO Box if applicable.)

New Address: _____ City: _____ Zip: _____

PO Box: _____

(Please include PO Box if applicable.)

Phone Number: _____

E-Mail Address: _____

Social Security Number (last 4 digits only): _____

Driver's License Number: _____

Date of Birth: _____

Date Signed: _____

Voter's Signature:

(Please sign inside the box.)

*You will receive a new voter card in the mail
after your transfer has been processed.*

For Office Use Only

Identification Verified: _____