

APPLICATION TO REMOVE A NAME FROM THE LIST OF ELECTORS

PERSON MAKING APPLICATION								
NAME	Last Name			First Name		Middle Name		
INFORMATION	Date of Birth yyyy/mm/dd			PROOF OF IDENTITY: (see list Government ID (one piece)			on reverse) Authorized ID (two pieces)	
	1				1	1		1
CURRENT ADDRESS								
	Number	Stre)	Unit	City	City/Town/Village YT Posta		
MAILING ADDRESS Same as above	Number	Stree	er	Unit	City,	City/Town/Village YT		
Removal Action: My Name Deceased Person Other								
	1							
NAME TO BE								
REMOVED	Last Name			First Name			Middle Name	
INFORMATION	Date of Birth yyyy/mm/dd			Relationship to Applicant				
RESIDENTIAL								
ADDRESS								
Same as above	Number	Stre)	Unit	City/Town/Village YT		Postal Code	
MAILING								
ADDRESS Same as above	Number	Stree	er	Unit	City/Town/Village YT		Postal Code	
Additional Information or Supporting Documentation (if required)								
Declaration: I make this application to request the removal of a name, my own name or the name of another person,								
from the List of Electors. I believe this information, to the best of my knowledge, to be true.								
, , , , , , , , , , , , , , , , , , , ,								
Signature of Applicant to Remove a Name from the List of Electors Date								
Note: Once application is approved by Elections Yukon, this name will be removed from the List of Electors.								

 THIS SPACE FOR ELECTION VUKON USE ONLY

 ELECTORAL DISTRICT
 Approved By:
 Date

 Elector ID #/Remarks
 Entered By:
 Date