

NOTIFICATION OF DECEASED VOTER

North Carolina

PENDER COUNTY BOARD OF ELECTIONS P. O. BOX 1232 BURGAW, NC 28425

PHONE: 1-910-259-1220 FAX: 910-259-1269 penderboe@pendercountync.gov

PURPOSE

This form is intended to provide notification of the death of a North Carolina registered voter to a county board of elections. Upon confirmation of the voter, the county board of elections will *remove* the voter from the county's list of registered voters. This form may only be completed by a near relative or personal representative of the deceased voter's estate.

INSTRUCTIONS

Complete this form as thoroughly as possible. Requested information will be used to ensure that we have the correct voter. Sign the form and then submit (*mail, fax, or scan & email*) it to the county board of elections office in the county in which the deceased voter lived prior to death. Contact information for the county boards of elections is available at: <u>www.ncsbe.gov</u>.

Deceased Voter Inform	ation							
Last Name		Firs	st Name			Middle N	Name	Suffix
Date of Birth (MM/DD/YYYY)	Age	Gender Male Female	Last 4 Dig	gits of SSN	Driver License o	or ID No.	Voter Registration Num	ber (if known)
Voter Registration Address				Last Known	Address (If differ	ent than v	oter registration address)	
City	State	Zip		City		S	tate Zip	
County of Registration	ation Date of Death (if known)			County of Death (if known)			State of Death (if known)	
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Full Name		Relationship to voter: (Required, please check one) North Carolina law defines a "Near Relative" as: Spouse Sibling Parent Stepparent Child Stepchild Grandchild Grandparent
City	State Zip Code	Mother or Father in-law Daughter or son in-law Legal guardian Representative of Estate
Signature		
X		
Signature (Required)		Date Signed

Thank you for providing this information.

Send form to the voter's county board of elections or to the State Board of Elections.



P. O. BOX 27255 • RALEIGH, NC 27611-7255 1-866-522-4723 • elections.sboe@ncsbe.gov Administrative Use Only

Attach Registration List Label Here (If applicable)