



**REQUEST FOR REMOVAL FROM
PERMANENT VOTE BY MAIL STATUS**

I hereby request to be REMOVED from Permanent Vote by Mail Status
in Sangamon County, Illinois.

Voter's Name: _____

Street Address: _____

City: _____ Zip: _____

Date of Birth: _____ Phone: _____

Under penalties as provided by law, pursuant to 10 ILCS 5/29-10, the undersigned registered voter certifies that the statements set forth in this Request For Removal From Permanent Vote By Mail Status are true and correct.

Signature of Voter **(REQUIRED)** Today's Date

Please mail completed form to Sangamon County Election Office
200 S. 9th Street, Springfield, Illinois 62701

If you have any questions, please call Sangamon County Election Office at 217-753-8683 or visit our
website at countyclerk.sangamonil.gov.



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