

# Notification of Deceased Voter Form

<p><b>Instructions &amp; Purpose</b></p>	1	<p>This form is intended to provide notification of the death of a Durham County registered voter. Upon confirmation of the voter, the Durham County Board of Elections will <i>remove</i> the voter from its list of registered voters. This form may <b>only</b> be completed by a near relative or personal representative of the deceased voter's estate.</p> <p>Complete this form as thoroughly as possible. The requested information will be used to ensure that we have the correct voter. Sign the form and then submit (<i>mail, fax, scan &amp; email, or in-person</i>) it to the Durham County Board of Elections. Contact information for the office can be found in Section 5.</p>																
<p><b>Deceased Voter Information</b></p> <p>Please provide the deceased voter's information.</p>	2	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">Last Name <b>(required):</b></td> <td style="width: 25%;">First Name <b>(required):</b></td> <td style="width: 15%;">Middle Initial:</td> <td style="width: 35%;">Suffix:</td> </tr> <tr> <td>Date of Birth <b>(required):</b></td> <td>Gender <input type="checkbox"/> Male <input type="checkbox"/> Female</td> <td>Last 4 of SSN:</td> <td>DL or ID Number:</td> </tr> <tr> <td>Voter Registration No.</td> <td>Date of Death:</td> <td>County of Death:</td> <td>State of Death:</td> </tr> <tr> <td colspan="3">Last Known Registered Address:</td> <td>City/State/Zip:</td> </tr> </table>	Last Name <b>(required):</b>	First Name <b>(required):</b>	Middle Initial:	Suffix:	Date of Birth <b>(required):</b>	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	Last 4 of SSN:	DL or ID Number:	Voter Registration No.	Date of Death:	County of Death:	State of Death:	Last Known Registered Address:			City/State/Zip:
Last Name <b>(required):</b>	First Name <b>(required):</b>	Middle Initial:	Suffix:															
Date of Birth <b>(required):</b>	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	Last 4 of SSN:	DL or ID Number:															
Voter Registration No.	Date of Death:	County of Death:	State of Death:															
Last Known Registered Address:			City/State/Zip:															
<p><b>Your Information</b></p> <p>Must be a near relative as defined by NC law.</p>	3	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">Full Name:</td> </tr> <tr> <td>Address:</td> <td>City/State/Zip Code:</td> </tr> <tr> <td colspan="2">Relationship to Voter <b>(required):</b></td> </tr> <tr> <td colspan="2"> <input type="checkbox"/> Spouse <input type="checkbox"/> Sibling <input type="checkbox"/> Parent <input type="checkbox"/> Stepparent <input type="checkbox"/> Child <input type="checkbox"/> Grandchild <input type="checkbox"/> Grandparent  <input type="checkbox"/> Stepparent <input type="checkbox"/> Mother/Father/Daughter/or Son-in-Law <input type="checkbox"/> Legal Guardian  <input type="checkbox"/> Representative of Estate         </td> </tr> </table>	Full Name:		Address:	City/State/Zip Code:	Relationship to Voter <b>(required):</b>		<input type="checkbox"/> Spouse <input type="checkbox"/> Sibling <input type="checkbox"/> Parent <input type="checkbox"/> Stepparent <input type="checkbox"/> Child <input type="checkbox"/> Grandchild <input type="checkbox"/> Grandparent <input type="checkbox"/> Stepparent <input type="checkbox"/> Mother/Father/Daughter/or Son-in-Law <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Representative of Estate									
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<p><b>Your Signature</b></p>	4	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; text-align: center; vertical-align: middle; font-size: 24px;">X</td> <td style="width: 95%; height: 30px;"></td> </tr> </table>	X															
X																		
<p><b>Submit</b></p> <p>This form can be submitted by mail, fax, scan &amp; email, or in-person at the Board of Elections office.</p>	5	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; text-align: center; vertical-align: top;"> <p><b>By Mail:</b> P.O. Box 868 Durham, NC 27702</p> </td> <td style="width: 33%; text-align: center; vertical-align: top;"> <p><b>In-Person:</b> 3825 S. Roxboro Street Suite 101 Durham, NC 27713</p> </td> <td style="width: 33%; text-align: center; vertical-align: top;"> <p><b>Electronic:</b> Fax: 919-560-0688 Email: elections@dconc.gov</p> </td> </tr> </table>	<p><b>By Mail:</b> P.O. Box 868 Durham, NC 27702</p>	<p><b>In-Person:</b> 3825 S. Roxboro Street Suite 101 Durham, NC 27713</p>	<p><b>Electronic:</b> Fax: 919-560-0688 Email: elections@dconc.gov</p>													
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