



# County of Passaic

Superintendent of Elections

501 River Street • Paterson, New Jersey 07524

**Shona Mack-Pollock**

*Superintendent of Elections*

TEL: (973) 881-4516

FAX: (973) 881-1634

e-mail: [SOElections@passaiccountynj.org](mailto:SOElections@passaiccountynj.org)

## Voter Name Removal

I, \_\_\_\_\_, Date of Birth: \_\_\_\_\_, residing at:

First and Last Name (Please Print)

\_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_,  
(Street) (City) (State) (Zip Code)

Request that the Office of the Passaic County Superintendent of Elections and Commissioner of Registration remove my name as an active voter in Passaic County.

Effective Date:

\_\_\_\_\_  
Month / Day / Year

Reason (s) for name removal:

I have never voted in \_\_\_\_\_  
(Specific New Jersey County)

Moved out of County

I Moved out of State

\_\_\_\_\_  
(out of county address)

\_\_\_\_\_  
(out of state address)

Other

Please Explain: \_\_\_\_\_

\_\_\_\_\_  
Print name of Voter

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Return to: Passaic County Superintendent of Elections  
501 River Street  
Paterson, NJ 07524