OHIO VOTER REGISTRATION CANCELLATION REQUEST
R.C. 3503.21

I hereby request the cancellation of my voter registration in the State of Ohio, County of Columbiana, the City, Township or Village of _____, Precinct _____. My registration address on file with the Columbiana county board of elections is:

House number and street:
City, Village, Township:
Zip Code:
Print Name:
Signature:
Date:

The filing of this request does not prohibit you from reregistering to vote at any time in the future.