



AFFIDAVIT

REQUEST FOR CANCELLATION & REMOVAL  
FROM CITY OF NEWPORT VOTING LIST

Under penalty of perjury, I hereby affirm that I am \_\_\_\_\_;

NAME OF VOTER

That my name appears on the list of registered voters for the City of Newport, at the  
address of: \_\_\_\_\_;

RESIDENCE ADDRESS APPEARING ON VOTER REGISTRATION

I hereby request that my voter registration be cancelled and that my name be removed  
from the list of registered voters for the City of Newport for the following reason:

- I no longer reside at the above address, or any another address in Newport. I now  
reside at: \_\_\_\_\_

CURRENT ADDRESS

- I still reside in the City of Newport; however, I no longer wish to be a registered voter  
of the City. I understand I may re-register at any time using a voter registration form.

For verification purposes, please provide your date-of-birth: \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE OF VOTER

\_\_\_\_\_  
DATE

Please return original form to:  
(fax or email not accepted)

**Newport Canvassing Authority**  
**43 Broadway**  
**Newport, RI 02840**