**Purpose:** 

Name of Form:

Cancellation of voter registration.

**Number of Copies Required:** 

One.

**Completed by:** 

Registrar of Deaths.

**Filing Date:** 

Not later than the 10th day of each month.

Filed with:

Voter Registrar of county of residence of decedent.

## **Comments:**

For each decedent over the age of 18 who was a Texas resident at the time of death, the registrar of deaths furnishes an abstract of death to the voter registrar of the county of residence of decedent. The voter registrar determines whether the decedent was a registered voter and if so, cancels the registration.

If the abstract affects the person in question by cancelling his/her registration, the voter registrar shall retain the abstract on file with the voter's registration application.

Current form is 3/07.

## ABSTRACT OF DEATH CERTIFICATE

I, the undersigned, being the Registrar of Deaths forhereby certify that the following person was of legal voting age and a resident of time of his/her death.			County, do nd a resident of this State at the	
Name of decedent				
Address				
	(F	Place of residence)		
Date of birth	Sex	_ Date of death	Place of death	
Supplemental identifi	ication:			
		Signature of I	Signature of Registrar of Deaths	
	Seal	Date		

Not later than the 10<sup>th</sup> day of each month, each local registrar of deaths in this State shall furnish to the registrar of voters of the county of residence of the decedent an abstract of the death certificate of each decedent over the minimum voting age who was a resident of this State at the time of his/her death.