

# Voter Update Form

## Voter Name

Please print your name.

**1**

First name \_\_\_\_\_ Middle name \_\_\_\_\_  
Last name \_\_\_\_\_

## Voter Address

Please print your updated home address.

**2**

Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

## Voter Current Information

Please provide the last four digits of your Social Security number, date of birth, telephone number, email, and political party.

**3**

Last 4 digits of your Social Security #   
Date of birth (mm/dd/yyyy) \_\_\_\_\_ Phone \_\_\_\_\_  
Email \_\_\_\_\_  
Political Party (optional)  Democratic  Republican  Libertarian  Unaffiliated

## Voter Previous Information

Please print the voter's last registration information.

**4**

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

## Reason for Request

Required

Please mark one reason for selecting this form.

**Note: If changing political party, please complete section 3 as well.**

**5**

I, the undersigned, do hereby verify that the above St. Louis County registered voter:

<input type="checkbox"/> Has moved	<input type="checkbox"/> Is requesting to be removed from the voter roll
<input type="checkbox"/> Has a name change	<input type="checkbox"/> Needs to correct their date of birth
<input type="checkbox"/> Has a political party change	<input type="checkbox"/> Needs to correct their Social Security number
<input type="checkbox"/> Is deceased as of _____	

## Signature of Voter

Required

Voter's signature required.

**6**

Voter, sign and date		Date (mm/dd/yyyy)
<b>X</b>		

## Person Submitting Application for Deceased Voter

To update the record of a deceased voter, the person submitting the application must sign the application and write the relationship to the voter.

**7**

Person submitting application for deceased, sign and date		Date (mm/dd/yyyy)
<b>X</b>		

Relationship to voter \_\_\_\_\_

Phone \_\_\_\_\_

Return form:

**BY EMAIL** boecvoterregistration@stlouiscountymo.gov

**BY FAX** 314.615.1999

**IN PERSON** or **BY MAIL** to 725 Northwest Plaza Drive, St. Ann, MO 63074

For more information, visit [www.stlouiscountymovotes.gov](http://www.stlouiscountymovotes.gov) or call 314.615.1833 / RelayMO711 or 800.735.2966.