

AFFIDAVIT OF RELATIVE OF DECEASED VOTER

I, _____, do hereby swear that
(name of relative)

_____ a registered voter in this county is deceased.
(name of deceased voter)

My relation to the voter is _____.

Signature

Sworn to and subscribed before me this the _____ day of _____, 20_____.

Signature of Officer Administering Oath

Title of Officer Administering Oath