



CANCELLATION OF POSTAL OR PROXY VOTE

Please complete in **BLACK INK** and **BLOCK LETTERS**.

ONLY ONE PERSON PER FORM.

If you need any help in completing this form, please telephone our Helpline on 01737 276000
I wish to cancel my Postal Vote/Proxy Vote and revert to voting in person

Home Address:

About you:

First Name(s) (in full):

Surname:

Title (Mr., Mrs., Miss, Ms., Dr., Other)

Daytime or Mobile Telephone Number:

YOUR DECLARATION

As far as I am aware the details on this form are true and accurate. You can be fined for making a false statement on this form.

Date of Birth (e.g. 02 05 1965)

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Day

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Month

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Year

Please sign in the box below using Black Ink

Please note that the signature given above and the date of birth will be checked against the original application held in our records.

You will be notified, in writing, at your home address, of the cancellation of your postal vote.

This form should be completed and returned to the following address:

Electoral Registration Officer, Town Hall, Castlefield Road, Reigate, Surrey, RH2 0SH