

*Fergus County*  
**Election Administration**  
712 W Main St. Suite 204  
Lewistown, MT 59457  
406/535-5242



# Request for Absentee Voter List Removal

**Name:** \_\_\_\_\_ **DOB:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

I understand that by signing below my name will be removed from the absentee ballot list. If I wish to vote in future elections by absentee ballot, I must apply by using a standard application form.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_