

MICHAEL BENNETT • SUPERVISOR OF ELECTIONS • MANATEE COUNTY

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**REQUEST FOR REMOVAL
FROM
REGISTRATION RECORDS**

Date: ____/____/____

Registration Number: _____

TO: Michael Bennett
Supervisor of Elections
Manatee County, FL

Pursuant to Section 98.082, Florida Statutes, I, _____, an elector registered in precinct number ____ Manatee County, Florida, do hereby request that my name be removed from the registration books.

Print Name of Elector

Residence Address

City and State

Date of Birth

Signature of Elector