

Change of Enrollment

City of Worcester
OFFICE OF THE CITY CLERK

My name is now enrolled on the voting list as a member of the _____ party.

I therefore request that my Party be changed to the _____ party
As provided by Sec. 38 of Chapter 53 Gen. Laws.

Witness my hand this _____ day of _____, 20_____

X

Signature - Signed under pains and penalty of perjury

Printed Name

Printed Address

Telephone #

Date of Birth

For City Clerk Use Only:

Voter ID # _____

Print Form