

REQUEST FOR WITHDRAWAL OF SIGNATURE FROM PETITION

Background

Under state law, a voter who has signed a recall petition, and who wishes to have his or her name withdrawn from that petition, may file a written request for signature withdrawal with the Shasta County Registrar of Voters/Elections Department. The written request must include the voter's name, residence address, and signature, and must be filed in the Registrar of Voters/Elections Department.

Instructions

Fill out fields below and have a person submit, mail, email, or fax to the Registrar of Voters/Elections Department (address & info below). Please use one form per registered voter.

I have signed the recall petition(s) indicated below and hereby request my name be withdrawn from the petition(s):

Recall of Shasta County Supervisor Joe Chimenti

TITLE OF PETITION

NAME OF VOTER (AS REGISTERED)

RESIDENCE ADDRESS OF VOTER

SIGNATURE OF VOTER

Deadline

Your request for withdrawal must be received in the Shasta County Elections Division Office before the recall signature petition is filed...which could occur on any day. The Shasta County Registrar of Voters/Elections Department hours of operation are Monday-Friday 8AM - 5PM. You can call them at (530) 225-5730.

YOU HAVE 3 OPTIONS FOR SUBMITTING THIS FORM:

Mail to:

Shasta County Registrar of Voters/Elections Department
1643 Market Street
Redding, CA 96001

Scan & Email to:

countyclerk@co.shasta.ca.us

Fax to:

(530) 225-5454