

THIS FORM IS FOR **CHANGE OF NAME WITHIN VERNON COUNTY.**

PLEASE COMPLETE, **SIGN**, AND RETURN THIS FORM TO THE COUNTY CLERK'S OFFICE.

- 1) MAIL: MIKE BUEHLER  
100 W. CHERRY, STE. 6  
NEVADA, MO 64772-3367
  
- 2) FAX: 417-667-6035
  
- 3) EMAIL: [ELECTIONS@VERNONCOUNTYMO.ORG](mailto:ELECTIONS@VERNONCOUNTYMO.ORG)

---

APPLICATION FOR VOTER REGISTRATION NAME CHANGE

NAME \_\_\_\_\_  
                                LAST                                FIRST                                MIDDLE

PREVIOUS NAME \_\_\_\_\_  
                                LAST                                FIRST                                MIDDLE

ADDRESS \_\_\_\_\_  
                                STREET OR ROUTE                                CITY                                ZIP

PHONE \_\_\_\_\_                                LAST 4 DIGITS SSN \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_                                DATE OF TRANSFER \_\_\_\_\_

TOWNSHIP \_\_\_\_\_

SIGNATURE OF VOTER \_\_\_\_\_

---

**FOR OFFICE USE ONLY**

SCHOOL DIST. \_\_\_\_\_ WATER DIST. \_\_\_\_\_

\_\_\_\_\_  
PERSON TAKING CHANGE ADDRESS

**Mike Buehler**  
**Vernon County Clerk**  
**100 W. Cherry**  
**Courthouse Suite 6**  
**Nevada, MO 64772- 3367**