

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: ADRIENNE LEE
100 W. CHERRY, STE. 6
NEVADA, MO 64772-3367

- 2) FAX: 417-667-6035

- 3) EMAIL: 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 _____

Adrienne Lee
Vernon County Clerk
100 W. Cherry
Courthouse Suite 6
Nevada, MO 64772- 3367