



## Snohomish County Elections

*A Division of the Auditor's Office*

**Carolyn Weikel**  
County Auditor

**Connie Barndt**  
Chief Deputy Auditor

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Dear Voter:

Thank you for notifying Voter Registration about your name change. To change your name, please read the voter declaration on this letter and sign in blue or black ink and return mail to;

Snohomish County Elections  
Attn: Name Change  
3000 Rockefeller Ave M/S 505  
Everett WA 98201

Once we receive your name change we will update our Voter Registration files. You will receive all future mailings with your new name. You will also receive a new voter registration card in the mail two to three weeks after we process your completed form. Your new signature will be applied to your existing voter registration record and will be used for future ballot signature verification. If you have any questions please call 425-388-3444 or email [elections@snoco.org](mailto:elections@snoco.org).

### **Voter Declaration:**

I declare that the facts on this voter registration form are true. I am a citizen of the United States, I will have lived at this address in Washington for at least thirty days immediately before the next election at which I vote, I will be at least 18 years old when I vote, I am not disqualified from voting due to a court order, and I am not under Department of Corrections supervision for a Washington felony conviction.

_____	
Print New Name	
_____	
New Signature	Date

Print your previous name: \_\_\_\_\_

Provide your date of birth: \_\_\_\_\_

Provide your new Driver's License number: \_\_\_\_\_