## CHANGE OR CORRECT VOTER NAME/ADDRESS BY EMAIL, MAIL OR FAX.



## FILL OUT THIS FORM TO CHANGE YOUR NAME AND/OR ADDRESS ON THE VOTERS LIST

## SEND THIS COMPLETED FORM TO ELECTIONS NUNAVUT WITH A COPY OF YOUR IDENTIFICATION:

✓ ONE PIECE OF ID THAT SHOWS YOUR NAME, ADDRESS AND SIGNATURE; OR

✓ TWO PIECES OF ID: ONE WITH YOUR NAME AND SIGNATURE + ONE WITH NAME AND ADDRESS.

PLEASE PRINT CLEARLY (Fields marked + are mandatory)				
OLD INFORMATION — AS IT APPEARS ON THE V	OTERS LIST			
COMMUNITY.	CONSTITU	CONSTITUENCY		
LAST NAME*	FIRST AND	FIRST AND MIDDLE NAME(S)+		
DATE OF BIRTH• //		Gender•		
Home Address+				
House/Apt # Str	EET		PO Box Postal Code	
<b>NEW INFORMATION – CHANGES OR CORRECTI</b>	ONS			
COMMUNITY (IF DIFFERENT) CONSTITU		JENCY (IF DIFFERENT)		
LAST NAME (IF DIFFERENT)	<b>F</b> IRST AND	FIRST AND MIDDLE NAME(S) (IF DIFFERENT)		
HOME ADDRESS (IF DIFFERENT) HOUSE/APT # STREET		MAILING ADDRESS (IF DIFFERENT)	PO BOX POSTAL CODE	
I HAVE LIVED IN THIS COMMUNITY.		I HAVE LIVED IN NUNAVUT+		
ALL MY LIFE SINCE /	E SINCE / / /		Since / / yyyy/ mm / dd	
	NCH LANGUAG	E RIGHTS HOLDER:	Gender	
<b>FOR VOTER:</b> I certify that the information above is correct.	n <b>For Elect</b> above is t	ION OFFICER: I believe rue.	e the information	
X Voter's Signature	2	( Election Officer's S	ignature	
Date		Name of Election	Officer	
I would like a copy of my completed form: Emailed 🔲 Mailed 🔲		C Voter ID #	IFFICE USE ONLY	

**Privacy Statement:** The information in this form is collected under the authority of the Nunavut Elections Act. The information will only be used for elections, by-elections and plebiscites. Questions can be directed to: Chief Privacy Officer, Elections Nunavut: privacy@elections.nu.ca or call 800.267.4394.