



Bessie Holclaw
JEFFERSON COUNTY CLERK

Removal from Rolls Form

Name: _____
(Print)

Last 4 of Soc. Sec. #: _____ Date of Birth: _____
(MM/DD/YYYY)

Jefferson County Address: _____

Signature: _____ Date: _____

You must print this form and provide a signature before mailing, faxing or emailing to:

Jefferson County Clerk's Office
Election Center
701 W Ormsby Ave Ste 301
Louisville, KY 40203
Fax (502) 574-5044
elections@jeffersoncountyclerk.org

If you have questions, please contact us at 502-574-6100, or
elections@jeffersoncountyclerk.org.