

NOTICE OF DECEASED

To the Westchester County Board of Elections
25 Quarropas Street
White Plains, NY 10601

Please be advised that _____ who
(Name)
resided at _____
(Address)

_____ passed away on _____ . The birth date of the
(Date)
deceased was _____ .
(Date)

I, the undersigned, hereby certify that the above information is true and correct and understand that this form will be accepted for all purposes as the equivalent of an affidavit, and if it contains a material false statement, shall subject me to the same penalties as if I had been duly sworn.

Signature of Relative: _____

Relationship to Deceased: _____

Date: _____