



TOWN OF BELMONT
TOWN CLERK'S OFFICE
455 CONCORD AVENUE
BELMONT, MASSACHUSETTS 02478

ELLEN O'BRIEN CUSHMAN
TOWN CLERK

TEL. (617) 993-2600
FAX (617) 993-2601

NOTICE OF CHANGE OF ENROLLMENT

Please print.

Name of Voter: _____ Date of Birth _____

Address: _____ Belmont, MA 02478 _____
Precinct

New Party or Political Designation or Unenrolled: _____

I hereby request a change of enrollment effective: _____
Date

Signed under the pains and penalties of perjury.

Signature of Voter: _____

Please note: Massachusetts General Law requires the signature of the voter to authorize this change.