

MARIN COUNTY REGISTRAR OF VOTERS REQUEST CHANGE OF ADDRESS

Fill out, sign, and return the Request Change of Address form to change your address.
Return the form one of the following ways:

- **Scan and email** to [Maureen Hogan](#)
- **By mail:**
Marin County Elections Office
ATTN: Maureen Hogan
P.O. Box E, San Rafael, CA 94913
- **In person:**
Elections Department
3501 Civic Center Drive, Room 121
San Rafael, CA 94903
Hours: 8 a.m. to 4:30 p.m. Monday-Friday

Print name: _____

Birthdate: _____

New Residence address:

Number Street

City Zip Code

New Mailing address:

Number or PO Box Street

City Zip Code

I declare under penalty of perjury under the laws of the State of California that the information I have provided on this request is true and correct.

Sign name: _____

Date: _____