

**POLITICAL PARTY CHANGE FORM**

**CHRISTIAN COUNTY, MISSOURI**

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SS# (last 4 digits) \_\_\_\_\_ Date of Birth \_\_\_\_\_

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Last Name

First Name

Middle

**Please circle one to change your party affiliation on your voter registration for  
Christian County**

*Republican*

*Democratic*

*Libertarian*

*Unaffiliated*

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Signature of Voter

Date