



TOWN OF NORTH ATTLEBOROUGH, MASSACHUSETTS
Board of Election Commissioners
43 South Washington Street
North Attleborough, MA 02760-1642
(508) 699-0106

PARTY CHANGE APPLICATION

I HEREBY REQUEST THAT MY POLITICAL PARTY ENROLLMENT
BE CHANGED AS FOLLOWS:

FROM (Name of Party)_____

TO (Name of Party or Unenrolled)_____

SIGNED UNDER THE PAINS AND PENALTIES OF PERJURY.

NAME_____

(please print)

ADDRESS_____

(please print)

DATE_____

DATE OF BIRTH_____

SIGNATURE_____