



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 _____