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( <del>o</del> )	NAME	Last (					Year 1963
ठ	(as registered)	Jenn	First Sa	ndra	M J	Suffix (Jr, Sr, etc.)	
<b>4</b>	NAME CHANGE	Last	First		Mi	Suffix (Jr, Sr, etc.)	
इं ∖्र	OLD ADDRESS	Street 290 Li	HEDAKD	rive			
V02240500467055555		City Folly P	each		State 5	C Zip (	29439
ange	NEW ADDRESS	Street 498 Alb	emarle	Road #1	104	Inside City Limit	S Yes No
7		Charle Charle	iston		Starton	Zip (	29407
\\ \ <del>.</del>	MAIL ADDRESS Street or PO Box P.D. Box 13319						
The second second		City Charles	m, SC	,	State	2942	ede A
\(\frac{1}{2}\), \(\frac{1}{2}\).	PHONE Work 843-556-404 Gocial Security Numb						
oter 🛧	I hereby authorize the county board of voter registration to make the above changes.						
$3 \times 5$	I request the county board of voter registration to mail me a DUPLICATE voter registration certificate.						
$\mathcal{L} = \mathcal{U}$				-		1116	
N S	Signature of Voter	$-\Delta$			ate ,	12/1/15	
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[Personal information redacted by Charleston Currents]