PLEASE COMPLETE QUESTION A B O V E



DID THE REGISTRANT LISTED BELOW VOTE TODAY?

□YES OR □ NO

NEW	CURRENT INFOR				RMATION (PLEASE PRINT First Name:								
	Last Name:				First Name:				MI	II JI/ SI Date of Birth			tn
	House # Street Name				Apt # City						State	Zip)
or RE-	Phone #				Gende	r					L	ı	
ACTIVATED	()				☐ M or ☐ F								
REGISTRANT	GENERA	L Q L	ALIFICATIONS:										
(VOTER)			en of the United	State	es.								
			III be) 18 years ol			the d	ate o	f the e	lecti	on.			
	• I have	live	d in this school	distri	ct for at l	east 3	30 da	ys bef	ore t	his el	ection.		
	This is my signature or mark on the line below. ● The above information is true.												
	Registrant Signature Æ:									Date:			
UPDATE VOTER INFORMATION	YO Last Name		CORRECT OR CL				ΓΙΟΝ	(PLEA	SE I			LY) of Bi	4b
	Lasi Naiiie	, .			First Nam	e.			IVII	Jr/ S	ı Date	ОГБІ	run
	House #	Stre	eet Name			Apt #	Ci	ty			Stat	e Z	ip
	INCORRECT INFORMATION ON				LY AS IT APPEARS IN T PRINTED IN BOOK AS -								
	PRINTED IN	N BO	OK AS - Last Nam	ie:	PRINTED	IN BC	OK A	S - Fir	'st Na	ame:	MI	Jr/	'Sr
	House #	House # Street Name			Apt# City			ty	State Zip)	
	Date of Birt	Date of Birth				PAG	E#				LINE#		
	Registrant Signature .								Date:				
Nogistrant Orginatare & . Date.													
	DELETE					☑ REASON BELOW							
DELETE OR REMOVE VOTER	PAGE #:				LINE #:				■ Moved out of District				
	Last Name:								□ Duplicate				
	First Name:				Date of Birth				☐ Voter Deceased				
	Info Source: ☐ Self ☐ Spouse ☐			se 🗆					☐ Other:				
	Source Signature Æ:						· ·	Date:					
	·								_				
			***	**For	Official u	ıse or	ıly***	*					
Check if applicable:☐ County BOE Permitted Registrant to Vote (name not found in our books).													
☐ Change the Registrant's Poll Place: From:													
												lato	
Inspector Signature:					nt Name:				Date				
District Cler	n: [Date:				RINT S	СНО	OL DIS	STRICT	NAME	*****		