



## REQUEST TO MAKE VOTER REGISTRATION PRIVATE

Please fill out the following information:

I \_\_\_\_\_, hereby request my voter registration information be classified as private.

\_\_\_\_\_  
Address (resident address at which you are registered to vote)

\_\_\_\_\_  
County

\_\_\_\_\_  
Last four digits of social security #

\_\_\_\_\_  
Driver License or ID Number

PLEASE BE ADVISED this process is designed to protect your voter registration information. Your information may still be publically available in other public records and commercially available databases.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date Received (for office use only)