

**REQUEST FOR PUBLIC INFORMATION
BLAIR COUNTY VOTER REGISTRATION**

Date: _____

Candidate Name: _____

Office Candidate is seeking: _____

List Candidate is requesting:

Street List Walking List Super Voter List Other _____

Republican Democratic All Parties Other: _____

Paper CD

Super Voter List Only:

Primary Year(s): _____ Election Year(s) _____

Voters voted in All Any - of above requested Prim/Elections

Precinct or District Name: _____

Contact Name and Phone Number for pickup: _____

AFFIRMATION

I affirm that any information obtained from the records requested from the Blair County Elections and Voter Registration Office will not be used for purposes unrelated to elections, political activities or law enforcement, as required by 25 Pa. C.S. § 1404(b)(3); and that the material will not be used for commercial or improper purposes, as required by 25 Pa.C.S. § 1207(b). I further affirm that I will not publish the material on the Internet, as such publication is prohibited by 4 Pa. Code § 183.14(k).

I verify that this statement is true and correct. I understand that false statements made are subject to the penalties of 18 Pa. C.S. Section 4909, relating to unsworn falsification to authorities

Requestor's Name (Print)

Requestor's Signature

Requestor's Street Address

City

Zip Code

Requestor's Telephone Number

Date

Requesting information on behalf of: _____
(Candidate's name - If you are NOT the candidate)

Identification provided by requestor:

PA Driver's License or PA Photo ID Card License or ID Card #: _____

Employee Photo ID Card Type of Card: _____ ID#: _____

Other Photo ID Card Type of Card: _____ ID #: _____

Other Form of Identification Type of ID: _____ ID#: _____

County Employee Initials: - _____

(This form will not be available for public inspection or copying)