

**VOTER REGISTRATION APPLICATION
TRANSMITTAL**

To: _____
Election Office _____ Date

From: _____
Agency Office Number or Designation

Number of Voter Registration Applications Enclosed: _____

Comments:

(To be completed by Election Authority)

Date Received: _____

Number of Applications Received: _____

Number of Duplicate Registrations in Group: _____

Number of Incomplete Applications: _____

Problems or Other Comments: _____

White Copy - Election Authority

Yellow Copy - Agency