



**STATE OF GEORGIA
AGENCY BASED REGISTRATION APPLICATION
DECLARATION STATEMENT**

NAME: _____ DATE: _____

IF YOU ARE NOT REGISTERED TO VOTE WHERE YOU LIVE NOW, WOULD YOU LIKE TO REGISTER TO VOTE HERE TO DAY?

- 1) I WANT TO REGISTER TO VOTE.
- 2) I AM ALREADY REGISTERED TO VOTE.
- 3) I DO NOT WANT TO REGISTER TO VOTE

Applying to register or declining to register to vote will not affect the amount of assistance that you will be provided by this agency. IF YOU DO NOT CHECK ANY BOX, YOU WILL BE CONSIDERED TO HAVE DECIDED NOT TO REGISTER TO VOTE AT THIS TIME.

If you would like help in filling out the voter registration application form, we will help you. The decision whether to seek or accept help is yours. You may fill out the application in private.

If you believe that someone has interfered with your right to register or to decline to register to vote or your right in privacy in deciding whether to register or in applying to register to vote, you may file a complaint with the Secretary of State at 2 Martin Luther King Jr. Dr., Suite 802 West Tower, Atlanta, Georgia 30334 or by calling 404 656-2871.

If an applicant declines to register to vote, the declination shall be confidential and will be used only for voter registration purposes.

COMMENTS/REMARKS:

OFFICE USE ONLY

If an applicant refuses to sign the registration application, count as a declination and mark box 3 on this form. Note under comments: "Refused to sign application".

If box 2 or box 3 is checked, place form in declination file. Retain declinations for 24 months.