SAN LUIS OBISPO COUNTY CLERK-RECORDER
APPLICATION FOR CONFIDENTIAL VOTER REGISTRATION INFORMATION

Pursuant to Elections Code Sections 2187 (g), 2188, 2194, and 6254.4 of the Government Code, voter registration information is available to any candidate for federal, state or local office, to any committee for or against any proposed ballot measure, to any committee for or against any initiative or referendum measure and to any person for one of the below listed purposes as determined by the Secretary of State. All requests to view, purchase, or use voter registration information must be accompanied by this application.

CIRCLE PURPOSE: **Election, Scholarly, Journalistic, Political Research, Governmental**

1. NAME:_____
First Middle Initial Last

2. Complete Residence Address: _____
Number Street

_____
City State Zip Code

3. If no street address, give postal mailing address and describe location of residence. _____
Mailing Address

_____
Location of Residence

4. Complete Business Address: _____
Number, Street

( ) _____ _____
Telephone Number City State Zip Code

5. If no street address, give postal mailing address and describe location of business. _____
Mailing Address

_____
Location of Business

If this application is on behalf of any person or persons other than the applicant, this section must be completed.

_____ _____
Name of person or group requesting voter information Name of person authorizing or requesting the applicant to obtain the voter registration information

Complete mailing address: _____
Number, Street

( ) _____ _____
Telephone Number City State Zip Code

THIS SECTION MUST BE COMPLETED

Specific information requested: _____

Intended use of voter registration information: _____

*The aforementioned voter registration information set forth in affidavits of registration or derived from computer terminals, electronic data processing tapes or disks, printed labels and/or computer-printed listings will be used only for election, scholarly, journalistic, political, or governmental purposes as determined by the Secretary of State. The information (or a portion or copy thereof) will not be sold, leased, loaned, or given to any person, organization or agency, without first receiving written authorization to do so from the Secretary of State or the county elections official. I certify, under penalty of perjury, that all information on this form is true and correct under the laws of the State of California.

DATE:_____ PLACE:_____

Signature (Full Name As Above): _____

Drivers's License #:_____ State: _____ Expires: _____ **Verified:** _____