REGISTERED ELECTOR REQUEST FOR PUBLIC INFORMATION
LAWRENCE COUNTY VOTER SERVICES

Requestor:		**Phone:**		**Date:**	
Occupation:		**Email:**			
Address:					
City:		**State:**	**Pennsylvania**	**Zip:**	
Information Requested:					
Declared Intent:					
Data Format:	**Print ($.30 per page)** ☐	**Flash Drive ($30)** ☐		**Initials:**	
Charges:	**Total $**	**Cash:** ☐	**Check:** ☐	**Check #:**	**Paid:** ☐ **Date:**

Please make checks payable to: Lawrence County Treasurer

LEGAL NOTICE AND AFFIRMATION

I hereby affirm that any and all information obtained from the Lawrence County Voter Services by this request shall only be used for election, political, and law enforcement purposes, as set forth in 25 Pa.C.S. § 1404(b)(3); and shall in no way be used for commercial or improper purposes (as set forth in 25 Pa.C.S. § 1207(b). Furthermore, I affirm that I will not in any way, manner, or form, publish this information on the Internet, nor will I share this information with any other individual, elector, candidate, party, committee, or entity, as such activity is strictly prohibited, subject to monitoring, and will be enforced as provided in 4 Pa. Code § 183.14(k).

I hereby verify that this statement is true and correct, and that I agree to abide by the Affirmation as stated above in its entirety. I understand that false statements are subject to the penalties of 18 Pa.C.S. Section 4904, relating to unsworn falsification to authorities, and affixing my signature below (in the field titled "Affirmation Signature"), is both my understanding of, and agreement to abide by, all of the terms and limitations set forth within.

Affirmation Signature:				
Identification provided:	**Pennsylvania Driver's License / State Photo ID:** ☐		**License / ID #:**	
Other:		**Other Photo ID:** ☐	**Other ID #:**	

TO BE COMPLETED UPON PICKUP

Picked Up By (Print):					
Signature:			**Date Picked Up:**		
Staff Name:			**Staff Signature:**		
Director Approval:	**Approved:** ☐	**Denied:** ☐	**Reasoning (if denied):**		
Director Signature:			**Date:**		