



REQUEST FOR VOTER REGISTRATION DRIVE

Please Print Legibly

Name of Organization: _____
(Ex: El Paso County Elections Department)

Name of Event: _____
(Ex: National Voter Registration Day)

Address of Event: _____
(Ex: 500 E. San Antonio Ave.)

Room/Area of Event: _____
(Ex: Foyer)

Point of Contact Name and Title: _____
(Ex: Paulo Aguirre, Elections Generalist)

Email Address: _____
(Ex: P.Aguirre@epcounty.com)

Phone Number: _____ Fax Number (if any): _____
(Ex: 000-000-0000) (Ex: 000-000-0000)

Event Date: ____/____/20____ Event Times: _____
(Ex: 07/01/2016) (Ex: 12:00 p.m. to 4:00 p.m.)

Signature: _____ **Date:** _____

The El Paso County Elections Department will need a regular table (approximately 6 ft. by 2 ½ ft.) and two chairs in order to conduct the voter registration drive.

Please submit completed form to Paulo Aguirre via email at P.Aguirre@epcounty.com. Should you want to cancel your reservation once it's approved by the El Paso County Elections Department please contact Paulo Aguirre via email or at (915)546-2154.

For Office Use Only:

Approved: ____ Yes ____ No Date Approved: ____/____/20____

Approved by: _____

Signature: _____

Notes: