SUPERVISORS OF ELECTIONS' ACCOUNTING OF 3PVRO'S VOTER REGISTRATION APPLICATIONS

(SECTION 97.0575, FLORIDA STATUTES) **Page 1 of ___ pages.**

SOEs must account for voter registration applications provided to, and received from, each 3PVRO.

This report reflects applications provided/received on: _____, _____, 20____.
(month) (day) (yr)

NOTES:

(1) If forms are received from someone who should be registered as a 3PVRO but is not registered, submit the requested information and place "NR" in the "3P _____" line. Obtain as much identifying information about the unregistered person or organization as possible. Inform the person or entity of the requirement to register and report the incident and information to the Division of Elections.

(2) Email this form to 3PVRO@dos.fl.gov with the form attached in .pdf format no later than **noon on the business day following the day being reported**.

3PVRO's identification number: **3P_____**

a. Number of voter registration applications provided:
State forms_____ Federal forms: _____
b. Number of voter registration applications received:
State forms (blank): _____ State forms (non-blank): _____
Federal forms (blank): _____ Federal forms (non-blank): _____

3PVRO's identification number: **3P_____**

a. Number of voter registration applications provided:
State forms_____ Federal forms: _____
b. Number of voter registration applications received:
State forms (blank): _____ State forms (non-blank): _____
Federal forms (blank): _____ Federal forms (non-blank): _____

3PVRO's identification number: **3P_____**

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b. Number of voter registration applications received:
State forms (blank): _____ State forms (non-blank): _____
Federal forms (blank): _____ Federal forms (non-blank): _____

Use continuation pages if needed – see next page.

Supervisor of Elections Office for _____ County

_____ / _____ / _____
Name of Person Completing Form **Signature** **Date Submitted**

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