**FORM D**

# **VOTER REGISTRATION**

Upon entry into services, the LMHA shall provide consumers 18 years of age or older an opportunity to register to vote. For all consumers who express a desire to register to vote, the LMHA shall provide assistance and privacy in the completion of the registration form.

If the consumer declines to register to vote the LMHA will request that the consumer complete the declination form. The LMHA shall maintain the completed declination form for 22 months and in a confidential location that is not a part of the consumer’s medical or clinical record.

If the consumer asks that the LMHA submit the completed registration form, then the LMHA must mail or deliver the form to the county voter registrar within five days following completion of the form.

The LMHA shall use the training tape provided by the Office of the Secretary of State training seminars for staff who will be responsible for consumer voter registration.

OPPORTUNITY TO REGISTER TO VOTE

1. If you are not registered to vote where you live now, would you like to register to vote here today?

 YES NO

1. Applying to register or declining to register to vote will not affect the amount of assistance that you will be provided by this agency.
2. IF YOU HAVE NOT CHECKED EITHER BOX, YOU WILL BE CONSIDERED TO HAVE DECIDED NOT TO VOTE AT THIS TIME AND WILL BE ASKED TO SIGN BELOW.
3. If you would like help 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 form in private and put in the mail yourself.
4. If you believe that someone has interfered with your right to register or to decline to register to vote, your right to privacy in deciding whether to register or in applying to register to vote, you may file a complaint with the Elections Division of the Secretary of State, P.O. Box 12060, Austin, Texas 78711, 1-800-252-8683 or via email at elections@sos.state.tx.us.
5. If you decline to register to vote, this decision will remain confidential and be used only for voter registration purposes.
6. If you decide to register to vote, information regarding the office to which the application was submitted will remain confidential, and again will only be used for voter identification purposes.

# DECLINATION OF VOTER REGISTRATION

I decline to register to vote today.

**FOR STAFF USE ONLY:**

Applicant Refused to Sign \_\_\_\_\_

Applicant Unable to Sign \_\_\_\_\_

Applicant Took Form to Mail \_\_\_\_

 (Staff Initial Appropriate Block)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_/\_\_\_\_/\_\_\_

Signature of Applicant Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed Name of Applicant

**OFERTA DE OPORTUNIDAD DE INSCRIBIRSE PARA VOTAR**

1. Si no se ha inscrito para votar en la localidad donde reside ahora, ¿desea inscribirse hoy para votar?

 SI NO

1. El hecho de solicitar su inscripción en el registro de votantes, o de negarse a solicitarta, no àftectará el monto de la asistencia que le otorga esta agencia.
2. SI NO HA MARCADO NINGUNA DE LAS DOS CASILLAS, SE ASUMIRA QUE EN ESTA OCASION UD.

DECIDIO NO INSCRIBIRSE PARA VOTAR. SE LE PEDIRA FIRMAR ABAJO.

1. Si usted desea, podemos ayudarle a lienar el formulario de inscripción de votantes. A usted le toca decidir si quiere pedir o aceptar tal ayuda. Puede lienar la solicitud en privado y depositaria personalmente en le correo.
2. Si cree que alguien ha interferido con su derecho a inscribirse o a negarse a ello, o con su derecho a privacidad al decirdir si inscripirse o solicitar su inscripción en el registro de votantes, usted podrá entablar una queja dirigiéndose a: Elections Division of the Secretary of State, PO Box 12060, Austin, Texas 78711, tel. 1-800-252-8683.
3. Si se niega a inscribirse para votar, su decisión se mantendrá confidencial y sólo será utulizada para fines del registro de votantes.
4. Si decide inscribirse para votar, se mantendrá confidencial la información relativa a la oficina en la que presente su solicitud. Reiteramos que esta información sólo será utilizada para fines del registro de votantes.

## NEGATIVA A INSCRIBIRSE PARA VOTAR

Me niego a inscribirme hoy para votar.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_/\_\_\_/\_\_\_

Firma del/de la Solicitante Y Fecha

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nombre del/de la Solicitante en letras de molde