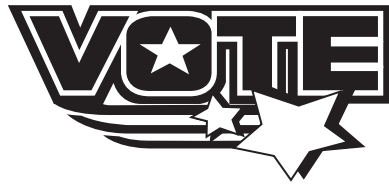


*Fill out this card after you have completed your Voter Registration Application form.
Fill out this card and use it when voting in the CCC classroom election.*

Voter Registration Card

**It is a right and a privilege to vote.
Please take your privilege seriously.**



**The person named below is registered to
vote in the CCC classroom election as of _____**
Date

Name Age SS#

Home address: Street City State Zip

School Name Class Level

Signature Date