



Office of the Secretary of the State
 State of Connecticut
 P.O. Box 150470
 165 Capitol Ave., Suite 1000
 Hartford, CT 06115-0470

Request for Non-Disclosure of Voter Information from Registry

I, _____, request non-disclosure of my name and address from the official registry list.
 (Print Name)

 (Initial Here) **Such non-disclosure is necessary for my and/or my family's safety.* I make this request pursuant to C.G.S. § 9-50(d) and sworn under penalty of false statement, as provided in § 53a-157b* of the general statutes.**

 (Initial Here) **I understand that the Voter Registry Privacy Program does not prevent disclosure of any other public records available such as land records, vital records, or DMV records.**

***It is the opinion of this office that "necessary for the safety of such voter or the voter's family" applies to voters who fear they or their family would be subject to bodily harm, threats of violence, intimidation, harassment or doxxing resulting from disclosure of their voter registry information.**

***Giving a false statement is a Class A misdemeanor, punishable by up to one year in prison, up to a \$2,000 fine, or both.**

Signature of Applicant: **X** _____

Date of Birth of Applicant: _____ / _____ / _____
 (Month: mm) (Day: dd) (Year: yyyy)

Address of Applicant: _____
 (Street)

 (City) (State) (Zip Code)

C.G.S. § 9-50(d): Notwithstanding any provision of the general statutes, if a voter submits to the Secretary of the State a signed statement that nondisclosure of such voter's name from the official registry list is necessary for the safety of such voter or the voter's family, the name and address of such voter on his or her voter registration record shall be confidential and shall not be disclosed, except that an election, primary or referendum official may view such information on the official registry list when such list is used by any such official at a polling place on the day of an election, primary or referendum. Such signed statement shall be sworn under penalty of false statement, as provided in section 53a-157b of the general statutes.

**Mail form to: Office of the Secretary of the State
 Attn: Aida R. Carini**