

Select originating cluster

Action Request Transmittal

Cathy Cooper
Authorized Signature

Number: SPD-AR-04-050
Issue Date: 09/21/04

Topic: Other

Due Date: 09/21/2004

Subject: The National Voter Registration Act of 1993-(NVRA)

Applies to (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> All DHS employees | <input checked="" type="checkbox"/> County Mental Health Directors |
| <input checked="" type="checkbox"/> Area Agencies on Aging | <input type="checkbox"/> Health Services |
| <input type="checkbox"/> Children, Adults and Families | <input checked="" type="checkbox"/> Seniors and People with Disabilities |
| <input checked="" type="checkbox"/> County DD Program Managers | <input type="checkbox"/> Other (please specify): |

Action Required:

The intent of the NVRA is to increase the number of citizens registered to vote and to establish safeguards that ensure citizens' right to vote. The Act is designed to increase the number of Americans registered to vote by requiring many public agencies to provide voter registration opportunities to their clients simultaneous with other services.

Attached is clarification of information from the NVRA training being held statewide September 9 through September 28, 2004.

NOTE: All forms are located on the DHS website at:

http://dhsforms.hr.state.or.us/forms/databases/FMPRO?-db=FormTbl.fp5&-lay=Main&-format=Findforms_FMP.htm&-findany

Reason for Action:

Federal law requires the State of Oregon to comply.

Field/Stakeholder review: Yes No

If yes, reviewed by:

If you have any questions about this action request, contact:

Contact(s):	Donna Weaver		
Phone:	503.945.5977	Fax:	503.373.7823
E-mail:	Donna.weaver@state.or.us		

9/17/04

Voter Registration Requirements

The following is further clarification from the NVRA trainings being held statewide last week and this week. Please share with staff as appropriate and implement necessary changes.

- Display the Voter Registration Poster in your Lobby areas. (They will be sent to the local site coordinator's attention by the SOS Elections Office.)
- All persons coming into our offices applying, reapplying, or changing address for any of our programs must be offered the opportunity to register to vote.
- If persons do not wish to register, ask them to sign and date the declination section at the bottom of the SEL 503 - Agency Voter Registration Card. If they do not wish to sign, a staff person will note the client's name or case # (if SSN, last 4 digits only) and date, with notation "refused to sign".
- Retain declination cards for 24 months. (There's no need to separate the card from the registration portion, if it would save some time locally).
- Proceed with current practices for persons wishing to register:
 - ▶ offer assistance in completing the registration part of the 503;
 - ▶ review for completion;
 - ▶ date stamp;
 - ▶ forward to local county elections office as per current time lines;
 - ▶ submit tally cards to the SOS, Elections Division per current procedures.
- Order all Voter Registration-related Forms through DHS FBOS, as per current procedures.
- Document your local office's procedures in writing.

Contact Person: Donna Weaver, 503-945-5977.