

Please return form to:  
 City of Pittsfield  
 Registrars of Voters  
 70 Allen St, Room 101  
 Pittsfield, MA 01201-6288

# CITY OF PITTSFIELD 2009 CENSUS

## IMPORTANT LEGAL DOCUMENT ANNUAL STREET LISTING

WARD    PRECINCT

**IMPORTANT:** General Laws of Massachusetts mandate an annual street listing of residents as of January 1 each year. Update the information provided by adding, deleting, or making changes below the printed information. Please SIGN and RESPOND within ten (10) days, even if NO changes are necessary. For assistance, call Registrars of Voters at 413-499-9460.

← If this address is incorrect, make corrections below:

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Previous Address if at current address less than one year:

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**WARNING:** Failure to respond to this mailing shall result in removal from the active voting list and may result in removal from the voter registration rolls. This form cannot be used to register to vote, or to change your Political Party.

PLEASE PRINT

DWELLING ADDRESS:

Political Party	Active/Inactive Voter	NAME			Mail to	Gender M/F	Date of Birth	Occupation	M = Moved D = Deceased	Veteran Y/N	Public Safety	# of Dogs	Nationality
		Last	First	Middle									

Signature of Respondent: \_\_\_\_\_ Date: \_\_\_\_\_  
 Signed under the pains and penalties of perjury as prescribed by M.G.L. Chapter 56

Telephone Number: \_\_\_\_\_ Unlisted: \_\_\_\_\_

**PLEASE MAIL YOUR COMPLETED CENSUS FORM IN THE RETURN ENVELOPE  
 OR DROP OFF AT CITY HALL, THE PUBLIC LIBRARY OR THE SENIOR CENTER**

**SPECIAL INSTRUCTIONS: Please return this form IMMEDIATELY.**

**COMPLIANCE with this State requirement provides proof of residency to protect voting rights, veterans' bonuses, housing for the elderly and related benefits, as well as providing information for selection of jurors. This form DOES NOT register you as a voter.**

**GENERAL INSTRUCTIONS: PLEASE PRINT.**

1. **Verify and/or complete all information listed on the form.**
2. **List ALL family or household members whose legal address is the same. Include any member of the family in Military Service, away at school, or confined to a rest home whose legal residence is the same.**
3. **Make all changes on the shaded line BELOW the printed line.**
4. **If a NEW MEMBER has been added to the family or household, enter the name and information on the blank lines at the end of the form.**
5. **Put a line through the name of any resident no longer residing at this address and list his/her NEW ADDRESS.**
6. **MOVED/DECEASED: Enter "M" or "D" if appropriate.**
7. **MAIL TO: Designates the person in your household to whom mail should be addressed. If you wish to make a change enter an "X" next to that individual's name. ONLY ONE "HEAD OF HOUSEHOLD" may be designated in order to have the entire family listed together on one form.**
8. **POLITICAL PARTY: 'R' for REPUBLICAN 'D' for DEMOCRAT 'L' for LIBERTARIAN 'U' for UNENROLLED (An unenrolled voter is one who is registered to vote but is not affiliated with any Party.)**
9. **OCCUPATION: Enter *occupation* NOT *place of employment*.**
10. **NATIONALITY: Enter only if NOT a U.S. citizen.**
11. **VETERAN: Check "Y" if you are a U.S. Veteran.**
12. **To return this form, tri-fold it and insert into return envelope provided and mail.**

**Thank you for your cooperation.**