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STATE OF CALIFORNIA VOTER REGISTRATION FORM

USE BLACK OR BLUE INK—PLEASE PRINT CLEARLY

1 LAST NAME: Schiff
FIRST NAME: Adam
MIDDLE NAME (if any): Bennett
ADDRESS: 333 Andover Drive
CITY: Burbank
STATE: CA ZIP CODE: 91504 COUNTY: Los Angeles
APR 2-SP 4 209

2 DATE OF BIRTH: 06 22 1960
PLACE OF BIRTH: U.S.
CA DRIVER'S LICENSE ON CA ID CARD: 7
TELEPHONE: 626 304 2724
E-MAIL ADDRESS:
POLITICAL PARTY: Democrat Party

3 LAST NAME: Schiff
FIRST NAME: Adam
STREET ADDRESS: 425 Amherst Drive
STATE: CA ZIP CODE: 91504 COUNTY: Los Angeles
CITY: Burbank
POLITICAL PARTY: Democratic

WARNING: It is a felony if you sign this statement...
VOTER DECLARATION: Read and Sign Below
I am a U.S. Citizen, I am at least 18 years old...
I certify under penalty of perjury...
SIGNATURE: You must sign and date in box below

59 AX 798302 072803

OPTIONAL SERVICE: Can you help in the following area(s)?
Provide Polling Place Sign
Provide Poll Worker
Provide Polling Place Worker

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