

# SUPERVISORS OF ELECTIONS' ACCOUNTING OF 3PVRO'S VOTER REGISTRATION APPLICATIONS

(SECTION 97.0575, FLORIDA STATUTES) **Page 1 of \_\_\_ pages.**

SOEs must account for voter registration applications provided to, and received from, each 3PVRO.

**This report reflects applications provided/received on:** \_\_\_\_\_, \_\_\_\_\_, 20\_\_\_\_.  
(month) (day) (yr)

**NOTES:**

**(1)** If forms are received from someone who should be registered as a 3PVRO but is not registered, submit the requested information and place "NR" in the "3P \_\_\_\_" line. Obtain as much identifying information about the unregistered person or organization as possible. Inform the person or entity of the requirement to register and report the incident and information to the Division of Elections.

**(2)** Email this form to [3PVRO@dos.myflorida.com](mailto:3PVRO@dos.myflorida.com) with the form attached in .pdf format no later than **noon on the business day following the day being reported.**

**3PVRO's identification number:** **3P** \_\_\_\_\_

a. Number of voter registration applications provided:  
State forms \_\_\_\_\_ Federal forms: \_\_\_\_\_

b. Number of voter registration applications received:  
State forms (blank): \_\_\_\_\_ State forms (non-blank): \_\_\_\_\_  
Federal forms (blank): \_\_\_\_\_ Federal forms (non-blank): \_\_\_\_\_

**3PVRO's identification number:** **3P** \_\_\_\_\_

a. Number of voter registration applications provided:  
State forms \_\_\_\_\_ Federal forms: \_\_\_\_\_

b. Number of voter registration applications received:  
State forms (blank): \_\_\_\_\_ State forms (non-blank): \_\_\_\_\_  
Federal forms (blank): \_\_\_\_\_ Federal forms (non-blank): \_\_\_\_\_

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State forms \_\_\_\_\_ Federal forms: \_\_\_\_\_

b. Number of voter registration applications received:  
State forms (blank): \_\_\_\_\_ State forms (non-blank): \_\_\_\_\_  
Federal forms (blank): \_\_\_\_\_ Federal forms (non-blank): \_\_\_\_\_

*Use continuation pages if needed – see next page.*

**Supervisor of Elections Office for** \_\_\_\_\_ **County**

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
**Name of Person Completing Form**                      **Signature**                                              **Date Submitted**

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3PVRO'S VOTER REGISTRATION APPLICATIONS**

(SECTION 97.0575, FLORIDA STATUTES)

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