**CITY OF PITTSFIELD**  
**IMPORTANT LEGAL DOCUMENT**  
**ANNUAL STREET LISTING**

General Laws of Massachusetts mandate an annual street listing of residents as of January 1 of each year. Please update and correct the information provided by adding, deleting, or making changes below the printed information. Please sign and return the form in the enclosed envelope within ten (10) days, even if no changes are necessary.

**DETAILED INSTRUCTIONS ARE LOCATED ON THE BACK OF THIS FORM. PLEASE PRINT.** If you are eligible to vote, you may register in person at any Town or City Hall in Massachusetts or by mail or online www.RegisterToVoteMA.com. If you wish to change your party designation, or for general assistance, call the Board of Registrars' Office at 413-499-9460 or visit our website at www.cityofpittsfield.org.

Resident Address:

If this address is incorrect, make corrections below

________________________________________

________________________________________

________________________________________

________________________________________

**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. (MGL Ch. 51, Sec. 4[c])**

If there is no party information next to your name in column I, you are not a registered voter. You MAY NOT change party affiliation nor register to vote on this census form. Downloadable forms are available at www.cityofpittsfield.org.

<table>
<thead>
<tr>
<th>Phone #:__________________________ Unlisted:______ Ward:</th>
<th>Precinct:</th>
</tr>
</thead>
<tbody>
<tr>
<td>LAST</td>
<td>NAME</td>
</tr>
<tr>
<td>FIRST</td>
<td>MIDDLE</td>
</tr>
</tbody>
</table>

*R=Republican D=Democrat L=Libertarian U=No Party Affiliation*

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**Signature of Respondent**  
**Date**

Signed under the Penalties of Perjury as Prescribed by M.G.L. 56, §4.

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

**Visit www.cityofpittsfield.org to complete your CENSUS on line if you have NO CHANGES**
NO CHANGES? Visit www.cityofpittsfield.org to complete your CENSUS on line. Click on City Hall drop box, select Registrar of Voters & Elections then select CENSUS INFORMATION to update your 2020 Census online. Simply input your Unique ID# found under the scan code on the front of this form.

CITY OF PITTSFIELD– SPECIAL INSTRUCTIONS: RETURN WITHIN TEN (10) DAYS

COMPLIANCE with this State requirement provides proof of residence, protection of voting rights, veteran’s bonus, housing for the elderly and related benefits as well as providing information for your community. This form DOES NOT register you as a voter, or allow you to change your political party. To register or change party, please obtain a mail-in registration form by calling 800-462-8683 or contact Registrar of Voters. You must register at least twenty (20) days prior to Federal, State, and Local Elections in order to vote.

GENERAL INSTRUCTIONS: PLEASE PRINT

Please verify and/or complete all information listed on this form, then sign and date it. Make corrections as necessary.

1. RESIDENT ADDRESS – If your resident address is incorrect, make the change in the space to the right of the incorrect address.
2. PHONE NUMBER – Please print and/or verify your phone number in the indicated space. If unlisted, put an “X” in the box next to the word “Unlisted”.
3. DELETIONS – Put a line through the name of any resident no longer residing at this address and list his/her new address. Use the blank lines at the bottom of the form to make any changes.
4. POLITICAL PARTY – “R” for REPUBLICAN, “D” FOR DEMOCRAT, “L” for LIBERTARIAN and “U” FOR UNENROLLED. All other letters represent political party designations. This reflects the information on file and can only be updated by completing the necessary voter registration or party enrollment change form.
5. NAMES OF ALL FAMILY / HOUSEHOLD MEMBERS AT THIS ADDRESS – Includes any member of the family in Military Service, away at school or confined to a rest home. If a NEW member has been added to the family or household, enter the name and information in the space provided on the form.
6. MAIL TO – This is the designated individual to whom this form has been sent. If you wish to change your designated mail to contact, please place a “Y” next to the name of the selected individual. ONLY ONE “HEAD OF HOUSEHOLD” may be designated in order to have the entire family listed together.
7. DATE OF BIRTH – “MM = Month, DD = Day, YYYY = Year.” If your date of birth is blank or incorrect, please make appropriate changes.
8. OCCUPATION – Enter occupation, not place of employment.
9. MOVED/DECEASED – If this person has moved or is deceased, please indicate with an “M” or “D”.
10. VETERAN – Write a “V” if you are a veteran of the U.S. Armed For
11. PUBLIC SAFETY – Check this box if you are a member of a public safety agency and WORK AND LIVE IN THIS COMMUNITY.
12. NO. OF DOGS – Number of dogs licensed to this individual.
13. NATIONALITY – If you are NOT a U.S. Citizen, please indicate your nationality
14. SPOUSE OF DECEASED VETERAN

IF YOU HAVE ANY QUESTIONS, PLEASE CALL REGISTRARS OF VOTERS AT (413) 499-9460

To return this form
Refold, insert into the provided return envelope and mail
Thank you for your cooperation

**PLEASE BE ON THE LOOK OUT for your 2020 FEDERAL CENSUS.**

Mailings begin March of 2020.**