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| ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): TELEPHONE NO.: _____ FAX NO. (Optional): _____ EMAIL ADDRESS (Optional): _____ ATTORNEY FOR (Name): _____ | FOR COURT USE ONLY |
| SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN DIEGO CENTRAL DIVISION, CIVIL, 330 W. BROADWAY, ROOM 225, SAN DIEGO, CA 92101 | |
| APPLICATION OF _____ | |
| APPLICATION AND ORDER DECLARING INFORMATION ON AFFIDAVIT OF VOTER REGISTRATION CONFIDENTIAL | CASE NUMBER _____ |

Applicant applies for an order declaring the residence address, telephone number, and email address listed on applicant's affidavit of voter registration declared confidential and not a public record.

DECLARATION

I, _____, declare that in accordance with Elec. Code § 2166 a life threatening circumstance exists to me or a member of my household in that:

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date: _____

Signature of Applicant

ORDER

Good cause appearing, the San Diego County Registrar of Voters is **ORDERED** to keep confidential the residence address, telephone number, and email address information appearing on the affidavit of voter registration of applicant, _____, pursuant to Elec. Code § 2166.

Date: _____

Judge of the Superior Court