

NVRA REMOTE TRANSACTION SHEET



“This is a voter registration agency, I am required to ask, ‘if you are not registered to vote where you live now, would you like to apply to register to vote today? I can send you an application.’”

Agency County		Source Type	<input checked="" type="checkbox"/> 01 <input type="checkbox"/> 02
Agency Name		Staff Name	

	Date	Client Name	Communication Type	Transmit Method
1.			<input type="checkbox"/> Phone <input type="checkbox"/> Mail <input type="checkbox"/> Email	<input type="checkbox"/> Mail <input type="checkbox"/> Email
2.			<input type="checkbox"/> Phone <input type="checkbox"/> Mail <input type="checkbox"/> Email	<input type="checkbox"/> Mail <input type="checkbox"/> Email
3.			<input type="checkbox"/> Phone <input type="checkbox"/> Mail <input type="checkbox"/> Email	<input type="checkbox"/> Mail <input type="checkbox"/> Email
4.			<input type="checkbox"/> Phone <input type="checkbox"/> Mail <input type="checkbox"/> Email	<input type="checkbox"/> Mail <input type="checkbox"/> Email
5.			<input type="checkbox"/> Phone <input type="checkbox"/> Mail <input type="checkbox"/> Email	<input type="checkbox"/> Mail <input type="checkbox"/> Email
6.			<input type="checkbox"/> Phone <input type="checkbox"/> Mail <input type="checkbox"/> Email	<input type="checkbox"/> Mail <input type="checkbox"/> Email
7.			<input type="checkbox"/> Phone <input type="checkbox"/> Mail <input type="checkbox"/> Email	<input type="checkbox"/> Mail <input type="checkbox"/> Email
8.			<input type="checkbox"/> Phone <input type="checkbox"/> Mail <input type="checkbox"/> Email	<input type="checkbox"/> Mail <input type="checkbox"/> Email
9.			<input type="checkbox"/> Phone <input type="checkbox"/> Mail <input type="checkbox"/> Email	<input type="checkbox"/> Mail <input type="checkbox"/> Email
10.			<input type="checkbox"/> Phone <input type="checkbox"/> Mail <input type="checkbox"/> Email	<input type="checkbox"/> Mail <input type="checkbox"/> Email
11.			<input type="checkbox"/> Phone <input type="checkbox"/> Mail <input type="checkbox"/> Email	<input type="checkbox"/> Mail <input type="checkbox"/> Email
12.			<input type="checkbox"/> Phone <input type="checkbox"/> Mail <input type="checkbox"/> Email	<input type="checkbox"/> Mail <input type="checkbox"/> Email
13.			<input type="checkbox"/> Phone <input type="checkbox"/> Mail <input type="checkbox"/> Email	<input type="checkbox"/> Mail <input type="checkbox"/> Email
14.			<input type="checkbox"/> Phone <input type="checkbox"/> Mail <input type="checkbox"/> Email	<input type="checkbox"/> Mail <input type="checkbox"/> Email
15.			<input type="checkbox"/> Phone <input type="checkbox"/> Mail <input type="checkbox"/> Email	<input type="checkbox"/> Mail <input type="checkbox"/> Email
16.			<input type="checkbox"/> Phone <input type="checkbox"/> Mail <input type="checkbox"/> Email	<input type="checkbox"/> Mail <input type="checkbox"/> Email
17.			<input type="checkbox"/> Phone <input type="checkbox"/> Mail <input type="checkbox"/> Email	<input type="checkbox"/> Mail <input type="checkbox"/> Email
18.			<input type="checkbox"/> Phone <input type="checkbox"/> Mail <input type="checkbox"/> Email	<input type="checkbox"/> Mail <input type="checkbox"/> Email
19.			<input type="checkbox"/> Phone <input type="checkbox"/> Mail <input type="checkbox"/> Email	<input type="checkbox"/> Mail <input type="checkbox"/> Email
20.			<input type="checkbox"/> Phone <input type="checkbox"/> Mail <input type="checkbox"/> Email	<input type="checkbox"/> Mail <input type="checkbox"/> Email