REGISTRATION FORM 2020 CENSUS LOCAL UPDATE OF CENSUS ADDRESSES OPERATION (LUCA)

Entity ID	
Government Name	e

Form D-2002 (XX-XX-XXXX) OMB Control No. XXXX	X-XXXX			S. DEPARTMENT OF COMMERCE S AND STATISTICS ADMINSTRATION U.S. CENSUS BUREAU		
A. Participa	ation Response (Submission De	adline Jaı	nuary 2018)			
	YES Our government is registering for LUCA. <i>Complete Sections B and C.</i>					
2. NO Our go	NO Our government is not registering for LUCA. <i>Complete Section B and mark an (X) for each reason that applies:</i>					
agency, o participa	council of governments, regional planning etc.) that includes our jurisdiction is ting in LUCA ufficient staff	g.	Restrictions on using Census for other purposes			
	ck of funds	n.	h. Other reason – Specify (Please print)			
=	time/too busy					
=	local address list available					
e. No		Ve will use t	hem to help improve future LUCA	operations.		
B. Signature of Tribal Chair or Highest Elected/Appointed Official Responding to the LUCA Invitation						
	of Tribal Chair or Highest Elected/A		_			
First		MI	Last			
2. Signature of H	lighest Elected Official/Appointed Off	ficial		Date – mm/dd/yyyy		
J						
3. Position (<i>e.g.</i> , 7	Tribal Chair ,Governor, Commissioner,	Mayor, Sup	ervisor; please do not abbreviate)	– Please print		
4. Physical/Mailing Address (e.g., Street Number, City, State, ZIP)						
5. Telephone - Area Code - Telephone number Ext						
5. Telephone - Ai	rea Code - Telephone number	Ext				
6. Email Address	<u> </u>					
C. Liaison Information – Designate your LUCA Liaison. This is the person responsible for protecting the confidential Census Bureau materials covered by Title 13, U.S. Code.						
Complete this sectio	on only if you are participating in LUCA	l.				
1. Name (please p	print)		_			
First		MI	Last			
2. Department, C abbreviate.)	Organization, or Agency Name – (e.g.,	Planning a	nd Zoning, Regional Planning Age	ncy,; please do not		
3. Position – (e.g.	, Tribal President, Director, Assessor, I	Planner; ple	ase do not abbreviate)			
Ť	ng Address (e.g., Street Number, City,	State, ZIP)				
•	•	Ext				
6. Email Address						

Complete this form and return it along with the completed, signed copies of the Registration Form, Self-Assessment Checklist, and Confidentiality Agreement. Use the enclosed postage-paid envelope addressed to ATTN: Geography LUCA Materials 63-E, National Processing Center, 1201 East 10^{th} St, Jeffersonville IN 47132. As an alternative, you may scan your completed forms, including forms with signatures, and email them to <u>GEO.2020.LUCA@census.gov</u>.