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| **REGISTRATION FORM**  **2020 CENSUS LOCAL UPDATE OF CENSUS ADDRESSES OPERATION (LUCA)** | **Entity ID** |
|  |
| **Government Name** |
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| Form D-2002  (XX-XX-XXXX)  OMB Control No. XXXX-XXXX | U.S. DEPARTMENT OF COMMERCE  ECONOMICS AND STATISTICS ADMINSTRATION  U.S. CENSUS BUREAU |

1. **Participation Response (Submission Deadline January 2018)**
2. **YES** Our government is registering for LUCA. *Complete Sections B and C.*
3. **NO** Our governmentis not registering for LUCA. *Complete Section B and mark an (X) for each reason that applies:*
4. Another government or organization (state, county, council of governments, regional planning agency, etc.) that includes our jurisdiction is participating in LUCA
5. Insufficient staff
6. Lack of funds
7. No time/too busy
8. No local address list available
9. Concerns about Census Bureau Title 13 materials
10. Restrictions on using Census Bureau Title 13 materials

for other purposes

1. Other reason – *Specify (Please print)*

Thank you for your comments. We will use them to help improve future LUCA operations.

1. **Signature of Tribal Chair or Highest Elected/Appointed Official Responding to the LUCA Invitation**
2. **Printed Name of Tribal Chair or Highest Elected/Appointed Official**

First MI Last

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1. **Signature of Highest Elected Official/Appointed Official Date –** *mm/dd/yyyy*
2. **Position (***e.g.,* *Tribal Chair ,Governor, Commissioner, Mayor, Supervisor; please do not abbreviate)* ***–*** *Please print*
3. **Physical/Mailing Address** *(e.g., Street Number, City, State, ZIP)*
4. **Telephone - Area Code - Telephone number Ext**
5. **Email Address**
6. **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 section only if you are participating in LUCA.*

1. **Name (please print)**

First MI Last

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1. **Department, Organization, or Agency Name –** *(e.g., Planning and Zoning, Regional Planning Agency,; please do not abbreviate.)*

1. **Position –** *(e.g., Tribal President, Director, Assessor, Planner; please do not abbreviate)*
2. **Physical/Mailing Address** *(e.g., Street Number, City, State, ZIP)*
3. **Telephone – Area Code - Telephone number Ext**

1. **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 10th St, Jeffersonville IN 47132. As an alternative, you may scan your completed forms, including forms with signatures, and email them to* [*GEO.2020.LUCA@census.gov*](mailto:GEO.2020.LUCA@census.gov)*.*