**PHASE 4 (POST 2020 CENSUS) STATE LEGISLATIVE DISTRICT BOUNDARY VERIFICATION FORM FOR \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**OMB Number: 0607-0988  
Expiration Date:** XX-XX-2024

**(state name)**

I have reviewed the state legislative district boundaries, identifying numbers (and names if applicable). I verify that the boundaries, numbers, and names are correct as shown.

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| --- | --- | --- | --- |
|  | State Legislative District – Upper Chamber (Senate – SLDU) |  | State Legislative District – Lower Chamber (House – SLDL) |

I have reviewed the state legislative district boundaries, identifying numbers (and names if applicable). I verify that the boundaries are correct as shown, except for the following block assignments specified below:

|  |  |  |  |
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|  | State Legislative District – Upper Chamber (Senate – SLDU) |  | State Legislative District – Lower Chamber (House – SLDL) |

I have reviewed the state legislative district boundaries, identifying numbers (and names if applicable). I verify that the boundaries are correct as shown, except for the identified block assignments. In lieu of specifying the incorrect block assignments, codes, or names, we are providing corrections by sending a new block equivalency file via e-mail to [rdo@census.gov](mailto:rdo@census.gov).

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|  | State Legislative District – Upper Chamber (Senate – SLDU) |  | State Legislative District – Lower Chamber (House – SLDL) |

Date \_\_\_\_\_\_\_\_\_\_\_ Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State \_\_\_\_\_\_\_\_\_\_\_ Zip Code \_\_\_\_\_\_\_\_\_\_

E-mail \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Fax \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **Plan Type (SLDU/SLDL)** | **County (code)** | **Census Tract** | **Census Block** | **Incorrect District #** | **Correct District #** |
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**Please return this form by e-mail to** [**rdo@census.gov**](mailto:rdo@census.gov) **or by FAX at 301-763-4348**