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

PHASE 4 (POST 2020 CENSUS) CITY WARD BOUNDARY VERIFICATION FORM FOR THE DISTRICT OF COLUMBIA

	d the city ward boundaries abers, and names are corr		and names if applicabl	e). I certify that the	
City	y Ward – (SLDU)				
	the city ward boundaries correct as shown, except f				
City Ward – (SLDU)					
I have reviewed the city ward 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 . City Ward – (SLDU)					
Date	Signature				
Name					
Title					
Address					
City		State	State Zip Code		
E-mail					
Fax					
County (code)	Census Tract	Census Block	Incorrect District #	Correct District #	

Please return this form by e-mail to rdo@census.gov or by FAX at 301-763-4348.