



Aaron Ammons
Champaign County Clerk
Champaign County, Illinois

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Deputy Registrar Application

PLEASE PRINT: LEGIBLE PRINTING IS ESSENTIAL FOR ALL VOTER REGISTRATION

Name (Last, First, MI): _____ Date: _____

Address: _____ City: _____

Home Phone: _____ Business Phone: _____

E-mail Address: _____

Occupation: _____

Employer's Name: _____

Business Address: _____

Last four digits of Social Security # or complete Illinois Driver's License #: _____

DEPUTY REGISTRAR

OATH OR AFFIRMATION

I do solemnly swear (or affirm, as the case may be) that I will support the Constitution of the United States, and the Constitution of the State of Illinois, and that I will faithfully discharge the duties of the office of deputy registrar to the best of my ability, and that I will register no person nor cause the registration of any person except upon his personal application before me.

Signature of Deputy Registrar

Subscribed and sworn (or affirmed) to before me on _____
(insert month, day, year)

Signature of person administering oath