Poll Observer Witness Statement

Please complete all applicable fields with as accurate a report as you can remember and then mail a copy of the completed form to Voter Integrity Project, 4441 Six Forks Rd., #106-233, Raleigh, NC, 27609 Witness Name Phone: (Cell) Phone: (Home) TIME **INCIDENT FACTS -- DETAILED DESCRIPTION** Other WITNESSES: Name(s) & Phone Number(s) Witness Report Included 1. 2. City County Precinct(s) Number Date of Incident **POLL LOCATION NAME POLL ADDRESS** OTHER PRECINCT(S) at this location Use back of this form for additional documentation. I declare under penalty of perjury under the laws of the State of North Carolina that the foregoing (and any attachments) is true and correct. Executed on ______, at ______, NC Signature of Election Monitor _____