

To: Registrar of Forrest County

Re: Request for Copy of Registration Test and Answers

I, \_\_\_\_\_ pursuant to the provisions of Title I of the 1964 Civil Rights Bill, do hereby request Theron Lynd, Registrar of Forrest County, Mississippi, or anyone acting in such capacity, to furnish this applicant with a certified copy of the registration test and of this applicant's answers to this test within 25 days of receipt of this request. I took this test on \_\_\_\_\_, 196\_\_.

ATTACHED: Self-addressed, stamped envelope.

Applicant's Signature

Name \_\_\_\_\_

Address \_\_\_\_\_

Submitted to the Registrar this \_\_\_\_\_ day of \_\_\_\_\_, 1964.

\* \* \* \* \*

RETURN COPY \*\*\*\* RETURN COPY \*\*\*\* RETURN COPY \*\*\*\* RETURN COPY \*\*\*\*

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\_\_\_\_\_  
Applicants Signature

Original of this request received \_\_\_\_\_ (date)

Forrest County Registrar Signature \_\_\_\_\_