

U.S. DEPARTMENT OF COMMERCE  
Economics and Statistics Administration  
U.S. CENSUS BUREAU

Entity ID
Government Name



**REGISTRATION FORM**  
**2020 CENSUS LOCAL UPDATE OF CENSUS**  
**ADDRESSES OPERATION (LUCA)**

**A. PARTICIPATION RESPONSE (Submission Deadline December 15, 2017)**

- YES** Our government is registering for LUCA. – Complete Sections B and C.
- NO** Our government is not registering for LUCA. – Complete Section B and mark an (X) for each reason that applies:
 

<input type="checkbox"/> <b>a.</b> Another level of government (state or county) that includes our jurisdiction is participating in LUCA	<input type="checkbox"/> <b>f.</b> Concerns about Census Bureau Title 13 materials
<input type="checkbox"/> <b>b.</b> Insufficient staff	<input type="checkbox"/> <b>g.</b> Restrictions on using Census Bureau Title 13 materials for other purposes
<input type="checkbox"/> <b>c.</b> Lack of funds	<input type="checkbox"/> <b>h.</b> Other reason – Specify (Please print) ↘
<input type="checkbox"/> <b>d.</b> No time/too busy	
<input type="checkbox"/> <b>e.</b> No local address list available	

*Thank you for your comments. We will use them to help improve future LUCA operations.*

**B. SIGNATURE OF TRIBAL CHAIR OR HIGHEST ELECTED/APPOINTED OFFICIAL RESPONDING TO THE LUCA INVITATION**

- Printed name of Tribal Chair or Highest Elected Official/Appointed Official – First, middle initial, last  

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- Signature of Tribal Chair or Highest Elected Official/Appointed Official  

	Date Month Day Year <table border="1"> <tr> <td> </td><td> </td><td> </td><td> </td><td> </td><td> </td> </tr> </table>						
- Position – (e.g., Tribal Chair, Governor, Commissioner, Mayor, Supervisor; please do not abbreviate) – Please print  

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- Physical/Mailing address  

Number and street name		
City	State	ZIP Code
- Telephone  

Area code	Number	Extension
- Email address  

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**C. LIAISON INFORMATION – Designate your LUCA Liaison.**

***This is the person responsible for protecting the confidential Census Bureau materials covered by Title 13, U.S. Code.***

*Complete this section only if you are participating in LUCA*

- Name – (Please print)  

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- Department, Organization, or Agency name – (e.g., Planning and Zoning, Regional Planning Agency; please do not abbreviate)  

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- Position – (e.g., Tribal President, Director, Assessor, Planner; please do not abbreviate)  

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- Physical/Mailing address  

Number and street name		
City	State	ZIP Code
- Telephone  

Area code	Number	Extension
- Email address  

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*Complete this form and return it along with the completed, signed copies of the Product Preference Form, Self-Assessment Checklist, and Confidentiality Agreement. Use the enclosed postage-paid envelope addressed to ATTN: Geography LUCA Materials 63-E, National Processing Center, 1201 East 10th St, Jeffersonville IN 47132. As an alternative, you may scan your completed forms, including forms with signatures, and email them to [GEO.2020.LUCA@census.gov](mailto:GEO.2020.LUCA@census.gov).*