

San Joaquin County Redistricting – Community of Interest Form

Your Information:	
Your Name:	<input type="text"/>
Your E-mail:	<input type="text"/>
Your Phone:	<input type="text"/>

Community Information:	
Descriptive Name:	<input type="text"/>
What bonds your community of interest? What do you see as the common links in your community?	
<input type="text"/>	
Where is your community of interest located? What are the boundaries of your community?	
<input type="text"/>	
Why should the community be kept together? Or, why should it be kept separate from another area?	
<input type="text"/>	
Any other comments regarding the community?	
<input type="text"/>	

Instructions:

Fill in the form as desired, then save a copy of the completed form.
Return the complete form via e-mail to: redistricting@sjgov.org