

SD Secretary of State
NVRA Agency Coordinator Monthly Reporting Form

Instructions: Please review your report for accuracy and resolve any errors or discrepancies. Do not leave any boxes blank - if there is no value for a particular query, insert a zero (0). Please return the completed report to the Statewide NVRA Coordinator by no later than the _____ of each month.

Reporting Period	_____ May 1, 2024 through May 31, 2024 _____
Reporting Agency	_____ Department of Social Services _____
Agency Coordinator	_____ Julie Scott _____

Number of Covered Transactions completed at each Agency office	_____ 19,573 _____
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(including driver's license offices operated by other entities under agreement with DPS)

Total Number of responses to the Voter Preference Question received by the Agency	_____ 14,804 _____
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(including forms with no response to the VPQ) and, of that number, the number of individuals who answered yes, no, or provided no answer to the question

No response to the Voter Preference Question	_____ 3,647 _____
Answered "Yes" to the Voter Preference Question	_____ 1,418 _____
Answered "No" to the Voter Preference Question	_____ 9,739 _____

Number of Voter Registration Applications collected by the office	_____ 210* _____
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Number of Voter Registration Applications transmitted by the office to appropriate election officials	_____ 207* _____
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*All Voter Registration Applications received are sent to the County Auditor. The difference in the number Received and the number transmitted is due to applications being received on the last day of the month and Sent to the auditor on the first day of the next month.

Agency Coordinator Signature _____