ASSEMBLY STANDING COMMITTEE ON ELECTION LAW
SUBCOMMITTEE ON ELECTION DAY OPERATIONS
AND VOTER DISENFRANCHISEMENT

NOTICE OF PUBLIC HEARING

SUBJECT: Protecting the Integrity of New York State’s Election Systems

PURPOSE: To examine the condition of the State’s election infrastructure and take testimony with regard to protecting the integrity of election systems against cyber-infiltration or attack.

New York City
250 Broadway
Tuesday
November 28, 2017
10 a.m.
Assembly Hearing Room
250 Broadway, Room 1923, 19th Floor

Testimony by Invitation Only

In September 2017, the United States Department of Homeland Security (DHS) confirmed to election officials in 21 states that their election systems had been targeted by Russian hackers during the 2016 election cycle. Such attacks included attempts to infiltrate state voter registration databases and, in two instances, hackers were successful in obtaining access to information in state voter registration systems.

This confirmation by DHS comes on the heels of United States House, Senate and intelligence community investigations which offered further substantiation of Russian attempts to influence the 2016 election. Furthermore, these investigations confirmed that there is no reason to believe that such disruption attempts were isolated incidents, and that states need to upgrade their cyber security efforts to prevent, recognize and mitigate threats to state and local election systems.

This hearing seeks testimony from federal, state, and local officials and information technology administrators, as well as public and private cyber security experts, to examine the current state of cyber security protections for the State’s election systems and consider recommendations to strengthen the security of New York’s election infrastructure as we approach the 2018 election cycle and beyond.

Oral testimony will be limited to ten (10) minutes’ duration. In preparing the order of witnesses, the Committee will attempt to accommodate individual requests to speak at particular times in view of special circumstances. These requests should be made on the attached reply form or communicated to Committee staff as early as possible.

Ten copies of any prepared testimony should be submitted at the hearing registration desk. The Committee would appreciate advance receipt of prepared statements.

In order to further publicize these hearings, please inform interested parties and organizations of the Committee’s interest in receiving written testimony from all sources.

In order to meet the needs of those who may have a disability, the Assembly, in accordance with its policy of non-discrimination on the basis of disability, as well as the 1990 Americans with Disabilities Act (ADA), has made its facilities and services available to all individuals with disabilities. For individuals with disabilities, accommodations will be provided, upon reasonable request, to afford such individuals access and admission to Assembly facilities and activities.
PUBLIC HEARING REPLY FORM

Persons invited to present testimony at, and those wishing to attend the public hearing on protecting the integrity of New York State’s Election Systems are requested to complete this reply form as soon as possible and mail, email, or fax it to:

Matt Aumand
Legislative Analyst
Assembly Committee on Election Law
Room 513 – Capitol
Albany, New York 12248
Email: aumandm@assembly.state.ny.us
Phone: (518) 455-4313
Fax: (518) 455-7250

☐ I plan to attend the public hearing on protecting the integrity of New York States’ election systems to be conducted by the Assembly Committee on Election Law on Tuesday, November 28, 2017 at 10 a.m.

☐ I have been invited to make a public statement at the hearing. My statement will be limited to 10 minutes, and I will answer any questions which may arise. I will provide 10 copies of my prepared statement.

☐ I will address my remarks to the following subjects:

_____________________________________________________________________

☐ I do not plan to attend the above hearing.

☐ I would like to be added to the Committee mailing list for notices and reports.

☐ I would like to be removed from the Committee mailing list.

☐ I will require assistance and/or handicapped accessibility information. Please specify the type of assistance required: __________________________________________

NAME: _____________________________________________________________________

TITLE: _____________________________________________________________________

ORGANIZATION: ____________________________________________________________

ADDRESS: _________________________________________________________________

E-MAIL: ____________________________________________________________________

TELEPHONE: _______________________________________________________________

FAX TELEPHONE: ___________________________________________________________