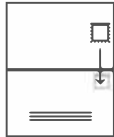


INSTRUCTIONS:

- 1 Sign and date your form (box 9 on the other sheet)
- 2 Place it underneath this sheet.
- 3 Place a stamp here.
- 4 Fold here, and tape or staple.
- 5 Mail it!



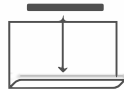
ASSEMBLE



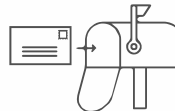
ADD STAMP



FOLD



TAPE or STAPLE



MAIL

Voter Registration Application
Before completing this form, review the General, Application, and State specific instructions.

Are you a citizen of the United States of America? Yes ☐ No ☐ If you answered "No" in response to either of these questions, do not complete this form. Please see our website for more information regarding eligibility to register prior to age 18.

1 First Name Last Name Middle Name(s) Last Name	2 Home Address Apt. or Unit # City/Town State Zip Code	3 Address Where You Got Your Mail If Different From Above City/Town State Zip Code	4 Date of Birth Month Day Year	5 Telephone Number (optional)	6 ID Number - (See item 6 in the instructions for your state)
7 Chapter of Party (See item 7 in the instructions for your state)	8 Race or Ethnic Group (See item 8 in the instructions for your state)	9 I have reviewed my state's instructions and I acknowledge that: <input type="checkbox"/> I am a United States Citizen. <input type="checkbox"/> I meet the eligibility requirements of my state and subscribe to any oath required. The information I provided is true to the best of my knowledge under penalty of perjury. If I have provided false information, I may be fined, imprisoned, or if not a U.S. citizen, deported from or refused entry to the United States. Date: _____ Month Day Year			

If you are registering to vote for the first time, please refer to the applicable instructions for information on submitting copies of valid identification documents with this form.

Please sign full name (or put mark)

Date: _____
 Month Day Year

Confused? E-mail: help@hellovote.org

FOLD HERE

VOTER REGISTRATION INFORMATION ENCLOSED

