

**REGISTRATION AND ABSENTEE BALLOT REQUEST - FEDERAL POST CARD APPLICATION (FPCA)****1. I REQUEST ABSENTEE BALLOTS FOR ALL ELECTIONS IN WHICH I AM ELIGIBLE TO VOTE AND I AM (Mark only one):**

- ☐ (a) A MEMBER OF THE UNIFORMED SERVICES OR MERCHANT MARINE ON ACTIVE DUTY, OR AN ELIGIBLE SPOUSE OR DEPENDENT
- ☐ (b) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. TEMPORARILY
- ☐ (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY

**2. MY INFORMATION (Required)**

a. TYPED OR PRINTED NAME (Last, First, Middle)

SUFFIX (Jr.,  
Sr., III, etc.)

b. PREVIOUS NAME (if applicable)

c. SEX

☐ M ☐ F

d. RACE

e. DATE OF BIRTH  
(MMDDYYYY)

f. SOCIAL SECURITY NUMBER

g. STATE DRIVER'S LICENSE OR I.D. NUMBER

h. TELEPHONE NUMBER (No DSN number; include all international prefixes)

i. FAX NUMBER (No DSN number; include all international prefixes)

j. EMAIL ADDRESS

**3. MY VOTING RESIDENCE ADDRESS (Required) (Military, use legal residence. Overseas citizens, use last legal residence in U.S.)**

a. NUMBER AND STREET (Cannot be a P.O. Box)

b. CITY, TOWN OR VILLAGE

c. COUNTY

d. STATE

e. ZIP CODE

**4. WHERE TO SEND MY VOTING MATERIALS**

a. MY CURRENT ADDRESS (Where I live now) (Required)

b. MY FORWARDING ADDRESS (NOTE: Complete 4b. only if you do not want your ballot mailed to the address in Block 4a.)

c. I PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY:

☐ MAIL☐ FAX☐ EMAIL**5. MY POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary elections):****6. ADDITIONAL INFORMATION (Designate the period for which you want to receive ballots - see instructions for Block 6, paragraph (3). Consult the Voting Assistance Guide for other specific state instructions.)****7. AFFIRMATION (Required)**

I swear or affirm, under penalty of perjury, that:

1. I am a member of the Uniformed Services or merchant marine on active duty or an eligible spouse or dependent of such a member, or a U.S. citizen temporarily residing outside the U.S., or other U.S. citizen residing outside the U.S., and
2. I am a U.S. citizen, at least 18 years of age (or will be by the day of the election), eligible to vote in the requested jurisdiction, and
3. I have not been convicted of a felony or other disqualifying offense or been adjudicated mentally incompetent, or if so, my voting rights have been reinstated, and
4. I am not registering, requesting a ballot, or voting in any other jurisdiction in the U.S., and
5. My signature and date below indicate when I completed this document, and
6. The information on this form is true and complete to the best of my knowledge.

I understand that a material misstatement of fact in completion of this document may constitute grounds for conviction of perjury.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

(MMDDYYYY)

(Witness/Notary and Address (if required))

(MMDDYYYY)