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

Δ		Linited Ctatos a	£ A			0.5	No		This area	- for off			
Are you a citizen of the United States of America? Yes No Will you be 18 years old on or before election day? Yes No									This space for office use only.				
If y	ou checked "No" in re	sponse to eithe	er of	these questions,									
	Mr. Miss	nstructions for rules regarding eligibility to Last Name			First Name			10.)	Middle Nam		lame(s)	 ne(s)	
1	Mrs. Ms.								<u> </u>		Jr " Sr <sub>IV</sub>		
2	Home Address			Apt. or Lot #		City/Town		State		Zip Code			
3	3 Address Where You Get Your Mail If Different From Above								City/Town		State		Zip Code
	Date of Birth			Telephone Num	nber (optional)		nal)		ID Number	- (See item 6	in the instructions for yo	our stat	e)
4	Month Day Year						6						
7	Choice of Party Race or Ethnic				Group structions for your State)		0						
9	I have reviewed my state's instructions and I swear/affirm that:  ■ I am a United States citizen  ■ I meet the eligibility requirements of my state and subscribe to any oath required.  The information I have provided in true to the best of my.  Please sign full name (or put mark) ▲												
	knowledge under penalty of perjury. If I have provided false								riease signiful name (of put mark)				
	information, I may citizen) deported	be fined, impi	rison	ed, or (if not a U.	.S.		Date:		onth		Year		
C	f you are registeriopies of valid identered	tification doc	ume	ents with this fo	orn	n.					for information	on si	ubmitting
lf	this application is for a	change of name	, wha	at was your name b	oefo	re you d	hanged it	?					
A	Mr. Miss Last Name Mrs. Ms.					First Na			me Mid		dle Name(s)		Jr II Sr IV
lf	you were <b>registered be</b>	fore but this is t	he fiı	rst time you are re	gist	ering fı	om the a	ddre	ss in Box 2, wh	at was your	address where you we	ere reg	gistered before?
В	Street (or route and box number)				Apt. or Lot #		ot#	City/Town/Count		nty	State		Zip Code
If	you live in a rural area b	out do not have a	stre	et number, or if you	u ha	ve no a	ddress, ple	ease s	show on the m	ap where yo	ou live.		
	■ Write in the names of the crossroads (or streets) nearest to where you live.  ■ Draw an X to show where you live.  ■ Use a dot to show any schools, churches, stores, or other landmarks near where you live, and write the name of the landmark.									NORTH 🔨			
C	Example	Route #2	,	● Grocery Store				_					
	Public	School •		Woodchuck Roa		X							
<u> </u>	the englishment in the older	to sign, who halr	20d t	ho applicant fill ou	t thi		ation? Civ	,o na	no addross an	d phone nu	mber (phone numbe	r onti	anal)

Mail this application to the address provided for your State.

D

FOR OFFICIAL USE ONLY						



FIRST CLASS STAMP NECESSARY FOR MAILING