NATIONAL VOTER RE	GISTRATION ACT							
Preference Form	/Application							
Client's preference (check the box only in 1. or 2.)	OFFICIAL USE ONLY (check all that apply)							
If you do not check any box, it will be considered that you chose not to register or update your voter registration at this time.	[Note: Only a client who is eligible can decline or accept an opportunity to register or update a record on his or her behalf]							
1. If you are not registered to vote where you live now, would you like to <u>apply</u> to register to vote today?	Client applied for: □ New services/assistance □ Renewal of services/assistance □ Address change							
Yes No, I decline.	2. How client applied: ☐ In person ☐ By phone ☐ At home ☐ Online/web service							
2. If you are registered to vote where you live now, would you like to <u>update</u> your voter registration record?	3. Client: ☐ Submitted registration application.							
Yes No, I decline.	 ☐ Was sent form/application on//(date). ☐ Did not complete application/took form/application. 							
CLIENT: Name or identification number Date	Preference form must be retained by agency for two years from dated form (DS-DE 77-ENG; rev. 11-2011)							
======Notice of								
Help: If you would like help in filling out your voter registration appli accept help is yours. You may fill out the voter registration application								
Benefits: If you are applying for public assistance from this agency affect the amount of assistance you will be provided by this agency.	, applying to register, or declining to register to vote will not							
Privacy: Your decision not to register or update your record and th registration record is confidential and may only be used for voter reg								
Formal Complaint: If you believe someone has interfered with e vote, your right to privacy in deciding whether to apply to register to political preference, you may file a complaint with: Florida Secretary Gray Building, 500 S. Bronough Street, Tallahassee, Florida 32399-(http://election.dos.state.fl.us/nvra/index.shtml or call 1-850-245-6200 [Authority: National Voter Registration Act (42 U.S.C. 1973gg); sections 97.023, 97.058, and	vote, or your right to choose your own political party or other of State, Division of Elections, NVRA Administrator, R.A. 0250. Forms for filing a complaint are available at 0.							
To Register to Vote in Florida, You Mu								
 Be a U.S. citizen (a lawful permanent resident <u>cann</u> Be at least 18 years old (you may pre-register if you 								
until you are 18 years old)	are at least to years old although you cannot vote							
Be a Florida resident								
Have had your right to vote restored if you have even	-							
 Have had your right to vote restored if a court has e your right to vote. 	ver declared you to be mentally incapacitated as to							
If you do not meet these requirements	, you are not eligible to register.							
You Can Register to Vote at:	·							
Any Supervisor of Elections' office								
 Any Supervisor of Elections office Any driver's license office or tax collector's office that 	at issues driver's licenses							
Any voter registration agency (that is, any public assistance office, any office that provides services for parsons with disabilities, any center for independent living, any armed forces recruitment office or any								

- public library)
- The Division of Elections (Florida Department of State)

You Can Hand-in or Mail a Completed Application to **Any of the Locations Listed Above**

If mailing, mail with sufficient postage to:

Division of Elections R.A. Gray Building 500 S. Bronough Street Tallahassee, Florida 32399-0250

(contact information: 850-245-6200; http://election.dos.state.fl.us)

Your Supervisor of Elections will contact you if your application is incomplete, denied, or a duplicate. Once you are registered, you will receive a voter information card.



Application to Register in Florida

Part 1 - Instructions

To Register in Florida, you must: Be a U.S. citizen, be a Florida resident and at least 18 years old (y ou may also pr eregister if you are 16 or 17 years old but you cannot vote until you are 18).

If you have ever been convicted of a felony or if a court has ever found you to be mentally incapacitated as to your right to vote, your right to vote has to be restored before you can register.

If you do not meet any <u>one</u> of these requirements, you are not eligible to register.

Where to Register: You can register to vote in-person or by mailing or hand-delivering your application to any supervisor of elections' office, any office that issues driver's licenses, a ny voter registration agency (for example, any public assistance office, assisted living facility, office serving persons with disabilities, public library, or armed forces recruitment office) or the Division of Elections. If mailing application, be sure to add sufficient postage.

Deadline to Register: The deadline to register to vote is 29 d ays before an upcoming election. You can update your registration record at any time, but to change your political party for a primary election, you must make the change by the registration deadline. For a new application, you will be contacted if your application is incomplete, denied or a duplicate of an existing registration. If you receive a voter information card, that means you are registered to vote.

Identification (ID) Requirements: If you are a new applicant, state and federal law require you to provide a current and valid Florida driver's license number (FL DL#) or Florida identification card number (FL ID#). If you have not been issued a FL DL# or FL ID#, you must then provide the last four digits of your Social Security Number (SSN). If you have not been issued any of these ID numbers, check "None" on the application. If you do not provide any number or do not c heck "None," your registration may be denied. See s.303, HAVA and section 97.053(6), Fla. Stat.

Special ID requirements: If you are registering by mail, have never voted in Florida, <u>and</u> have never been issued one of the ID numbers above, you must include with your application, or at a later time before you vote, one of the following:

- A copy of an ID that shows your name and photo (acceptable IDs)--U.S. Passport, debit or credit card, military ID, stude nt ID, retirement center ID, neighborhood association ID, or public assistance ID; or
- A copy of an ID that shows your name and current residence address (acceptable documents)--utility bill, bank statement, government check, paycheck, or oth er government document.

You do not have to provide the special ID to register if you are 65 or older, have a temporary or permanent physical disability, are a member of the active uniformed services or merchant marine who is absent from the county for active duty, or a family member t hereof, or are currently living outside the U.S. but eligible to vote in Florida.

Political Party Affiliation: Florida is a closed primary election state. That means voters registered with a political party can only vote for that party's candidates in a partisan race on a primary election ballot. However, regardless of the political party with which you registered, you can still vote in the primary election on any issue, any nonpartisan race or any race where the candidate will face no opposition in the general election.

Indicate the political party with which you wish to be registered. If you leave the political party affiliation box blank or write "None," you will be registered without any party affiliation. For a list of political parties registered in Florida, go to the Division of Elections' website under the heading For the Voters at: http://election.dos.state.fl.us/

Race/Ethnicity: You are not required to list your race or ethnicity. However, if you choose to do so, please choose only one of the following: American Indian/Alaskan Native, Asian/Pacific Islander, Black (Not Hispanic) Hispanic, Multiracial, White (Not Hispanic), or Other.

Public Record Notice: This application becomes a public record when filed. However, the following information is not available to the public and is used only for voter registration purposes: your FL DL#, FL ID# and SSN, where you registered to vote, and whether you declined to register or update your voter registration record when asked by a voter registration agency. Your signature can be viewed but not copied. (Section 97.0585, Fla. Stat.)

Criminal Offense: It is a 3rd d egree felony to submit f alse information. Penalties include fines_up to \$5,000 and/or up to 5 years of prison.

Questions: For more information, contact your local supervisor of elections, or refer to the Division of Elections' website at: http://election.dos.state.fl.us...

Información en español. Sirvase llamar a la oficina del supervisor de elecciones de su condado si le interesa obtener este formulario en español.

Application To Register in Florida

Part 2 - Form (national mail-in application)

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Are	you a citizen of the United States of Ame	erica	?					This spa	ace for office use	only.		
	•											
	Will you be 18 years old on or before election day? If you checked "No" in response to either of these questions, do not complete form.											
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(1.10		se see state-specific instructions for rules regarding eligibility to register prior to age 18.) Last Name First Name							N. C. at. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	`		
1	Last Name			FIRST	iame				Middle Name(s	(S)		
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	Home Address		Ant color					y/Town		State		ip Code
2	Home Address	Apt. or Lot #			City	7 J CWIT		State	2	.ip Code		
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	Address Where You Get Your Mail If Dit	ove	ve Ci			/Town		State	7	ip Code		
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	Date of Birth		Telephone	e Numb	er (optiona	31)		ID Number - (See Item 6 in the instructions for your state				
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_	No. 11 Day Manual	٦					۰					
	Month Day Year											
7	Choice of Party (see item 7 in the instructions for your State)	8	Race or E	thnic G	roup actions for you	r State)						
•	(see item 7 in the instructions for your state)	٦	(see item o ii	raie iristit	ictions for you	ii State)						
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	I have reviewed my state's instruction	ons a	and I swea	ar/affirn	n that:							
	■ I am a United States citizen					l						1
_	 I meet the eligibility requirements 	of n	nv state ar	nd		l						
9	subscribe to any oath required.		,			l						
	■ The information I have provided is	s true	e to the be	est of m	nv.							
	knowledge under penalty of perju							Plea	ase sign full nam	e (or put mar	k) 📥	
	information, I may be fined, impris	sone	d. or (if no	ot a U.S	3.	_			7		\neg	
	citizen) deported from or refused					Date	:: L					
- 1	Month Day Year											
If t	his application is for a change of name,	what	was your r	name be	etore you o	nange	d it?					
	Last Name	-	First Name				Middle Name(s)					
A								micale Harris(s)				
				<u></u>								
lf :	you were registered before but this is the	first 1	ime you ar	e regist	ering from	the ad	dres	s in Box 2,	what was your ad			
	Street (or route and box number)			/	Apt. or Lot	#	City	//Town/Cou	inty	State	2	Zip Code
В												
L												
lf	you live in a rural area but do not have a	stree	t number, o	or if you	have no a	ddres	s, ple	ase show o	on the map wher	e you live.		
	■ Write in the names of the crossroads	s (or	streets) ne	arest to	where you	ı live.						NORTH 🛧
	■ Draw an X to show where you live.											-
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l	 Use a dot to show any schools, chur near where you live, and write the na 				andmarks							
l	lical where you live, and while the th	ume	or the land	riciri.								
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~	Example 4						-	w				
	Route	•	Grocery Store									
		Vood	odchuck Road									
	Public School ●			×	1							
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If the applicant is unable to sign, who helped the applicant fill out this application? Give name, address and phone number (phone number optional).												nal).
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