Florida Voter Registration Application-Part 1 - Instructions To Register in Florida, you must be:

- · a U.S. citizen,
- a Florida resident
- at least 18 years old (you may pre-register at 16 or 17, but cannot vote until you are 18).

If you have been convicted of a felony, or if a court has found you to be mentally incapacitated as to your right to vote, you cannot register until your right to vote is restored.

If you do not meet any **ONE** of these requirements, you are not eligible to register.

Questions?

Contact the Supervisor of Elections in your county:

Visit the Florida Division of Elections' website at: dos.myflorida.com/elections/

CRIMINAL OFFENSE: It is a 3rd degree felony to submit false information. Maximum penalties are \$5,000 and/or 5 years in prison.

PUBLIC RECORD: Once filed, all information including your phone number and email address as provided become public record except for the following which can only be used for voter registration purposes: your FL DL#, FL ID#, SSN, where you registered to vote, and whether you declined to register or to update your voter registration record at a voter registration agency. Your signature can be viewed but not copied. (Section

Where to Register: You can register to vote by completing this application and delivering it in person or by mail to any supervisor of elections' office, office that issues driver's licenses, or voter registration agency (public assistance office, center for independent living, office serving persons with disabilities, public library, or armed forces recruitment office) or the Division of Elections. Mailing addresses are on page 2 of this form.

Deadline to Register: The deadline to register to vote is 29 days before any election. You can update your registration record at any time, but for a Primary Election, party changes must be completed 29 days before that election. You will be contacted if your new application is incomplete, denied or a duplicate of an existing registration. Your Voter Information Card will be mailed to you once you are registered.

Identification (ID) Requirements: New applicants must provide a current and valid Florida driver's license number (FL DL#) or Florida identification card number (FL ID#). If you do not have a FL DL# or FL ID#, then you must provide the last four digits of your Social Security number (SSN). If you do not have any of these numbers, check 'None." If you leave the field and box blank, your new registration may be denied. See 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, include one of the following with your application, or at a later time before you vote: 1) A copy of an ID that shows your name and photo (acceptable IDs--U.S. Passport, debit or credit card, military ID, student ID, retirement center ID, neighborhood association ID, or public assistance ID); or 2) A copy of an ID that shows your name and current residence address (acceptable documents--utility bill, bank statement, government check, paycheck, or other government document).

The special ID is not required 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 spouse or dependent thereof, or are currently living outside the U.S. but otherwise eligible to vote in Florida.

Political Party Affiliation: Florida is a closed primary election state. In primary elections, registered voters can only vote for their registered party's candidates in a partisan race on the ballot. In a primary election, all registered voters, regardless of party affiliation, can vote on any issue, nonpartisan race, and race where a candidate faces no opposition in the General Election. If you do not indicate your party affiliation, you will be registered with no party affiliation. For a list of political parties, visit the Division of Elections' website at: dos.myflorida.com/elections/

Race/Ethnicity: It is optional to list your race or ethnicity.

97.0585, Fla. Stat.) Boxes: Please check boxes (□) where applicable.																
Numbered rows 1 through 7 and 12 must be completed for a new registration.																
Florida Voter Registration Application Part 2 – Form (DS-DE #39, R1S-2.040, F.A.C.)(eff. 7/2019)				9)	Form available online at/Formulario disponible en líne registertovoteflorida.gov									líne	a en:	
This is	This is: 🗌 New Registration 🖟 Record Update/Change (e.g., Address, Party Affiliation, Name, Signature) 🚨 Request to Replace Voter Information Card															
1	Are you a citizen of the United	States of A	merio	ca?		☐ YE	S] NO			OFFICIAL	USE ONLY			
2	 I affirm I have never been convicted of a felony. If I have been convicted of a felony, I affirm my voting rights have been restored by the Board of Executive Clemency. If I have been convicted of a felony, I affirm my voting rights have been restored pursuant to s. 4 , Art. VI of the State Constitution upon the completion of all terms of my sentence, including parole or probation. 															
3	☐ I affirm that I have not been	n adjudicate	ed me	ntally	/ inca	pacita	ted w	/ith	respect	to vot	ing o	r, if I have, m	y right to vote	e has be	en r	estored.
4	Date of Birth (MM-DD-YYYY	r)		-			-									
5	Florida Driver License (FL DL) or Florida identification (F					L ID) C	ard N	lun	nber	· · · ·		If <u>no</u> FL DL or FL ID, then	Last 4 digits of Social Security Number		al	☐ I have NONE of these
	-		-							-		provide				numbers.
6	Last Name					First Name						Middle Name Su (Jr., Sr., I,				
7	Address Where You Live (legal residence-no P.O. Box)			()	Apt/Lot/Unit City				County Zip			Zip	Code			
8	Mailing Address (if different from above address)				Apt/Lot/Unit			City				State or Country Zip Code		Code		
9	Address Where You Were Last	Registered	to V	ote		Apt/Lo	t/Unit	t	City			State Zip Code			Code	
10	Former Name (if name is chang	ed)				Gend			State o	r Cour	ntry o	of Birth Telephone No. (optional)			al)	
11	Email me SAMPLE BALLO	•				ny cou	ınty.									
Party	(See <i>Public Record</i> Notice above Affiliation	Race/Ethn				v one)	('Ch	eck only	one if a	applic	able)				
(Check only one. If left blank, you will be registered without party affiliation) □ Florida Democratic Party □ Republican Party of Florida				laskaı der	n Native ☐ I am an active duty Uniformed Service Marine member I am a spouse or a dependent of an							n active duty uniformed			☐ I will need assistance with voting.	
□ N	o party affiliation nor party (print party name):	☐ Hispani ☐ White, / ☐ Multi-ra ☐ Other:_	not of	Hispa	anic O	rigin		_				marine memb				☐ I am interested in becoming a poll worker.
12	Oath: I do solemnly swear (or affirm) and defend the Constitution of the Late Constitution of the State of Figuralified to register as an elector under and laws of the State of Florida, and the provided in this application is true.	Inited States Iorida, that I er the Constitu	and am tion	SIG MAI HEF	RK										_	Date

Po Box 901 Policy Supervisor of Elections (New Or/2020) Princer 390-313-4170 Prince	Address your envelope to	Flagler-Supervisor of Elections	Lake-Supervisor of Elections	Pasco-Supervisor of Elections
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