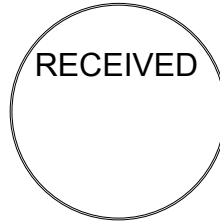




CALIFORNIA VOTER REGISTRATION RECEIPT



Affidavit Number



Print, Sign and Mail

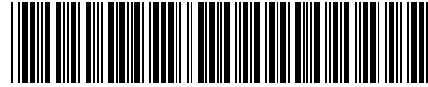
- Print and sign your application. You must fold and tape the form for mailing. Put the county elections office address on the outside. Place a first-class stamp in the box in the upper-right corner.

Important Notices

- This page is your receipt. Keep it until you get a Voter Notification Card in the mail. If you have any questions, please contact your county elections office and give the affidavit number above.
- The law protects your voter registration information against commercial use. Report any problems to the Secretary of State's Voter Hotline at (800) 345-VOTE (8683) or email elections@sos.ca.gov.



CALIFORNIA VOTER REGISTRATION APPLICATION



NAME & ADDRESS

CALIFORNIA ID	SSN4	DATE OF BIRTH
<input type="text"/>	<input type="text"/>	<input type="text"/>

PHONE NUMBER	PLACE OF BIRTH
<input type="text"/>	<input type="text"/>

EMAIL

MAILING ADDRESS

LANGUAGE

PERMANENT VOTE-BY-MAIL VOTER

IF NO ADDRESS, DESCRIPTION

VOLUNTEER

PRIOR REGISTRATION (IF APPLICABLE)

POLITICAL PARTY

ETHNICITY/RACE

I am a U.S. citizen.

I will be at least 18 years old by the next election.

READ, SIGN AND DATE BELOW

I declare under penalty of perjury under the laws of the State of California that:

- I am a U.S. citizen and will be at least 18 years old on election day.
- I am not currently imprisoned or on parole for the conviction of a felony.
- I understand that it is a crime to intentionally provide incorrect information on this form.
- The information on this form is true and correct.

Mail Immediately

<input type="text"/>	<input type="text"/>
----------------------	----------------------

SIGNATURE

DATE (MM/DD/YYYY)

FOR OFFICIAL USE ONLY

FIRST CLASS
STAMP
NECESSARY
FOR
MAILING



TAPE HERE

TAPE HERE