



SAMPLE

SECRETARY OF STATE ROSS MILLER

Application No.

4/13/2011 2:34:55 PM

STATE OF NEVADA

VOTER REGISTRATION APPLICATION

Application number grid

BOX 3 - NAME Please write your name exactly as it appears on your NV driver's license, ID card, or Social Security card referenced in Box 8. If you do not have any of these forms of identification, please see the instructions for Box 8.

BOX 4 - HOME ADDRESS Your home address is the street address assigned to the location at which you actually reside. If you reside at a location that has not been assigned a street address, a description of the location at which you actually reside must be provided. A P.O. Box cannot be listed as a home address, and a business address can only be listed if you actually live there.

BOX 8 - IDENTIFICATION REQUIREMENTS Federal and state law require you to provide your NV driver's license or NV ID number. If you do not have either, you must provide the last 4 digits of your social security number (SSN). If you do not have any of these three forms of identification, please contact your County Clerk/Registrar after you have completed and returned this form.

BOX 10 - PARTY REGISTRATION Mark your choice of a qualified party, "Nonpartisan" or "Other." If you mark "Other," you may print the name of an unlisted political party. If you register with a minor political party or as a nonpartisan, you will receive a nonpartisan ballot for the Primary Election.

BOX 13 - ASSISTING IN THE COMPLETION OF THIS FORM If you are assisting a person to register to vote, you must complete Box 13. FAILURE TO DO SO IS A FELONY.

DEADLINES FOR SUBMITTING APPLICATION

- > By Mail - postmarked by Saturday, 31 days before an Election.
> In Person at DMV - by Saturday, 31 days before an Election.
> In Person at County Clerk's or Registrar's Office - by Tuesday, 21 days before an Election (for Municipal Elections, in person at City Clerk's).
> For Special/Recall Elections - contact your County Clerk or Registrar.

NOTICE You are urged to return your application to register to vote to the County Clerk/Registrar in person or by mail. If you choose to give your completed application to another person to return to the County Clerk/Registrar on your behalf, and the person fails to deliver the application to the County Clerk/Registrar, you will not be registered to vote. Please print and retain a duplicate copy of this application as a receipt to register to vote.

INTERESTED IN BEING A POLL WORKER? Please contact your local County Clerk or Registrar's Office.

If you do not receive a NEVADA VOTER REGISTRATION CARD in the mail within 10 days, please call or visit your County Election Department

CHECK THIS BOX TO RECEIVE A SAMPLE BALLOT IN LARGER TYPE

WARNING: GIVING FALSE INFORMATION IS A FELONY AND INCLUDES A CIVIL PENALTY OF UP TO \$20,000.

CLICK AND TYPE OR USE BLACK INK - PLEASE PRINT CLEARLY

1 Are you a citizen of the United States of America? Yes No
Will you be 18 years of age or over on or before Election Day? Yes No
If you checked "no" in response to either of these questions, do not complete this form.
2 Check boxes that apply and complete items 3-13
New Registration Party Affiliation Change
Name Change Address Change

3 Last Name (Only) First Name (Only) Middle Name (Only) Jr. Sr. II III IV
SAMPLE

4 Home Street Address (No P.O. Box or Business Address. See Instructions) Apt. No. City State Zip Code
SAMPLE

5 Mailing Address - If different from above. (P.O.Box or Mail Service Address)
SAMPLE
6 Birth Date (M/D/YR)

7 Place of Birth (State or Country) 8 NV Driver's License or NV ID Card Number (if neither, last 4 digits of your SSN) 9 Telephone No. (Optional)

10 Party Registration - Check Only One Box
Democratic Party
Green Party
Independent American Party
Libertarian Party
Republican Party
Other Party - Write In Below
Nonpartisan (no party affiliation)

11 "I swear or affirm * I am a U.S. citizen * I will be at least 18 years old by the date of the next election * I will have continuously resided in Nevada at least 30 days in my county and at least 10 days in my precinct before the next election * The present address listed herein is my sole legal place of residence and I claim no other place as my legal residence * I am not laboring under any felony conviction or other loss of civil rights that would make it unlawful for me to vote. I declare under penalty of perjury that the foregoing is true and correct."
SIGNATURE OF APPLICANT (REQUIRED) DATE (REQUIRED)
(Print Form And Sign In Space Above) (M/D/YR)

12 Your name and residence address where you were last registered to vote. (Name Used, Street, Apt. No., City, State & Zip Code of Former Residence)

13 Important! If you are assisting a person to register to vote and you are not a field registrar appointed by a County Clerk/Registrar or an employee of a voter registration agency, you MUST complete the following. Your signature is required. Failure to do so is a felony.

Name Mailing Address City/State/Zip Code Signature
VALIDATING AGENCY USE ONLY - DO NOT WRITE BELOW THIS LINE

AGENCY STAMP HERE

Agency CANCELLED
Field Registrar INACTIVE
Mail
Other PRECINCT

APPLICATION NO.
RECEIVED BY:

Application number grid