

(After completion, fold to inside and seal before mailing.)

WARNING: Knowingly presenting false information in this application could result in criminal sanctions.

Standard Form 76 (Rev. 10-2005)
NSN 7540-00-634-5053

REGISTRATION AND ABSENTEE BALLOT REQUEST - FEDERAL POST CARD APPLICATION (FPCA)

1. I REQUEST ABSENTEE BALLOTS FOR ALL ELECTIONS IN WHICH I AM ELIGIBLE TO VOTE AND I AM (Mark only one):

- (a) A MEMBER OF THE UNIFORMED SERVICES OR MERCHANT MARINE ON ACTIVE DUTY, OR AN ELIGIBLE SPOUSE OR DEPENDENT
- (b) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. TEMPORARILY
- (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY

2. MY INFORMATION (Required)

| | | | | | | | |
|---|---------|-------------------------------------|------------------------------|---|----------------------------------|--|--|
| a. TYPED OR PRINTED NAME (Last, First, Middle) | | | SUFFIX (Jr., Sr., III, etc.) | | b. PREVIOUS NAME (if applicable) | | |
| c. SEX <input type="checkbox"/> M <input type="checkbox"/> F | d. RACE | e. DATE OF BIRTH M M D D Y Y Y Y | | f. SOCIAL SECURITY NUMBER - - | | g. STATE DRIVER'S LICENSE OR I.D. NUMBER | |
| h. TELEPHONE NUMBER (No DSN number; include all international prefixes) | | | | i. FAX NUMBER (No DSN number; include all international prefixes) | | | |
| j. EMAIL ADDRESS | | | | | | | |

3. MY VOTING RESIDENCE ADDRESS (Required) (Military, use legal residence. Overseas citizens, use last legal residence in U.S.)

| | | | | | |
|---|--|-----------|--|----------|------------------|
| a. NUMBER AND STREET (Cannot be a P.O. Box) | | | | | |
| b. CITY, TOWN OR VILLAGE | | c. COUNTY | | d. STATE | e. ZIP CODE - |

4. WHERE TO SEND MY VOTING MATERIALS

| | |
|---|--|
| a. MY CURRENT ADDRESS (Where I live now) (Required) | b. MY FORWARDING ADDRESS (NOTE: Complete 4b. only if you do not want your ballot mailed to the address in Block 4a.) |
| | |
| | |
| | |

c. I PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: MAIL FAX EMAIL

5. MY POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary elections):

6. ADDITIONAL INFORMATION (Designate the period for which you want to receive ballots - see instructions for Block 6, paragraph (3). Consult the Voting Assistance Guide for other specific state instructions.)

7. AFFIRMATION (Required)

I swear or affirm, under penalty of perjury, that:

1. I am a member of the Uniformed Services or merchant marine on active duty or an eligible spouse or dependent of such a member, or a U.S. citizen temporarily residing outside the U.S., or other U.S. citizen residing outside the U.S., and
2. I am a U.S. citizen, at least 18 years of age (or will be by the day of the election), eligible to vote in the requested jurisdiction, and
3. I have not been convicted of a felony or other disqualifying offense or been adjudicated mentally incompetent, or if so, my voting rights have been reinstated, and
4. I am not registering, requesting a ballot, or voting in any other jurisdiction in the U.S., and
5. My signature and date below indicate when I completed this document, and
6. The information on this form is true and complete to the best of my knowledge.

I understand that a material misstatement of fact in completion of this document may constitute grounds for conviction of perjury.

Signed: _____ Date: _____ Signed: _____ Date: _____
M M D D Y Y Y Y (Witness/Notary and address (if required)) M M D D Y Y Y Y

PRIVACY ACT STATEMENT

AUTHORITY: 42 USC 1973ff, "Title 1 - Registration and Voting By Absentee Uniformed Services Voters and Overseas Voters in Elections for Federal Office."

PRINCIPAL PURPOSE: Serves as an application for registration and/or request for absentee ballot for all persons covered by the Uniformed and Overseas Citizens Absentee Voting Act.

DISCLOSURE: Voluntary; however, failure to provide the necessary information may keep the pertinent jurisdiction from processing this request and may prevent you from voting absentee.

SPECIFIC INSTRUCTIONS FOR COMPLETION.

Please use the *Voting Assistance Guide* for specific state-by-state information when completing this form. Type or print legibly. Assistance and information regarding the use and completion of this form, as well as specific state information may be obtained from military Unit Voting Assistance Officers, U.S. Embassy and Consular Voting Assistance Officers, or organizations of U.S. citizens overseas and <http://www.fvap.gov>.

Block 1. Place an X only in one block. Marking Block 1(c) generally means that you were a resident of that state before departing the U.S. and your intent to return at some time in the future is uncertain. Marking Block 1(c) applies for a Federal ballot only (if one is printed by the state).

Block 2. MY INFORMATION. Block 2d. RACE. This information is requested from some states for statistical purposes by the Department of Justice in their enforcement of the Voting Rights Act and the National Voter Registration Act. See *Voting Assistance Guide*.

Block 3. MY VOTING RESIDENCE ADDRESS. Enter the complete legal voting residence address (including county) where you ACTUALLY LIVED in the state or territory. Your right to vote in your state and determination of your voting precinct depend on the physical location of your residence while you were in the state. DO NOT USE A POST OFFICE BOX NUMBER. In an area with no street names, indicate route name and number and box number. Also provide any additional information necessary to physically describe your residence location. If you have never lived in the U.S., check the *Voting Assistance Guide* for the states that allow you to vote using a parent's voting residence address.

Block 4. WHERE TO SEND MY VOTING MATERIALS. Block 4a is the complete mailing address where you are now living. If you have an alternate address or an address of a mail forwarding service that delivers your mail more quickly, enter that address in Block 4b. If your state allows absentee ballots to be sent via e-mail or fax, check the appropriate box in Block 4c. See *Voting Assistance Guide*. **This form should be resubmitted every time you change your mailing address.**

Block 5. MY POLITICAL PARTY PREFERENCE. This is an optional entry, however, this information is required by most states in order to vote in primary elections. Consult the *Voting Assistance Guide* for any specific state information required.

Block 6. ADDITIONAL INFORMATION.

(1) Provide any information that may assist the local election official in approving this application. It would be helpful if you provide the date you last lived at the address in Block 3a and if you list a name and telephone number of a local contact in the event the local election official cannot contact you and has a question concerning the application.

(2) If you were previously registered to vote in a jurisdiction other than the one in which you are applying, indicate "previously registered in (location)."

(3) Submission of this form serves as a request to receive ballots for all Federal elections held through the next two regularly scheduled general elections. If you do not wish to receive ballots for that length of time, you may request a ballot for each election for Federal office held in the next election year OR a ballot for only the next scheduled election for Federal office by noting your choice in Block 6. (Depending on your state of residence, you may also receive ballots for State and local offices during the selected period as well.)

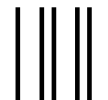
(4) If your state provides a special state write-in ballot and you are requesting one, indicate the reason you are requesting a special write-in ballot or place a sticker from the *Voting Assistance Guide* in this section.

Block 7. AFFIRMATION. Ensure that you read the oath, sign, and enter the date you completed the form in the spaces provided. **Not all states require a witness or notary, and state laws vary regarding the voting of convicted felons. Consult your state section of the *Voting Assistance Guide* or your Voting Assistance Officer for your state's requirements.**

MAILING INSTRUCTIONS. Fold and seal using the adhesive tabs so that the local election official's address is on the outside. DO NOT STAPLE.

(fold to outside)

FROM:
(Voter name and current complete military or overseas mailing address)



U.S. Postage Paid
39 USC 3406



PAR AVION

International airmail postage is required if not mailed in the U.S. Postal System or APO/FPO System, or Diplomatic Pouch.

OFFICIAL ABSENTEE BALLOTING MATERIAL - FIRST CLASS MAIL

NO POSTAGE NECESSARY IN THE U.S. MAIL - DMM 703.8.0

TO:

