# **Voter Registration and Absentee Ballot Request**

Federal Post Card Application (FPCA)

Print clearly in blue or black ink, please see back for instructions.

This form is for absent Uniformed Service members, their families, and citizens residing outside the United States. It is used to register to vote, request an absentee ballot, and update your contact information. See your state's guidelines at FVAP.gov.

1. Who are you? Pick	one.							
I request an absentee ballot for all elections in which I am eligible to vote AND:	☐ I am on active duty in ☐ I am a U.S. citizen livin☐ I am a U.S. citizen	ng outside the cour ng outside the cour	ntry, and my intent to retu	n. Irn is und	certain.			r dependen
Last name			Suffix (Jr., II)					☐ Ms.
First name			Previous names (if app	olicable)				
Middle name			Birth date (MM/DD/YY)	YY)	/		/	
Social Security Number			Driver's license or State	e ID #				
2. What is your addre	ess in the U.S. state or to	erritory where y	ou are registering to vo	ote and	requesting	g an abs	ente	e ballot?
Your voting materials wi	ll not be sent to this addres	ss. See instructions	s on other side of form.					
Street address				Apt #				
City, town, village				State				
County				ZIP				
3. Where are you now	v? You MUST give your	CURRENT addre	ss to receive your voti	ng mate	erials.			
Your mailing address. (D	oifferent from above)		Your mail forwarding ac	ddress. (	If different fr	rom mai	ling a	ddress)
4. What is your conta	ct information? This is s	so election officia	als can reach you abou	ıt your r	equest.			
Provide the country code	e and area code with your p	phone and fax nun	nber. Do not use a Defens	se Switch	ed Network	(DSN) n	umbe	er.
Email:			Phone:					
Alternate email:			Fax:					
5. What are your pref	ferences for upcoming e	elections?						
A. How do you want to recovoting materials from you			B. What is your politica	l party				
election office? (Select On	e) 🗖 Fax		for primary elections?					
	formation must you pro		rustions Additional state	quidalina	a may be fo	und at E	VADo	Vou
	t require more information to clarify your voter inform		ructions. Additional state g	guiaeiine	s may be ro	una at F	vap.g	ov. You
7. You must read and	sign this statement.							
I swear or affirm, und	ler penalty of perjury, th							
	form is true, accurate, and c ment may constitute ground:		, ,	stand tha	t a material r	nisstater	nent (	of fact in
	ast 18 years of age (or will by vote due to having been con		,, ,		-			ally
incompetent; or if so, m	y voting rights have been re	instated; and	. , ,		_			•
I am not registering, red	questing a ballot, or voting ir	n any other jurisdict	ion in the United States, ex	cept the	urisdiction ci	ted in thi	s voti	ng form.
Sign here X				_	y's date	/	,	/
				(MM/L	5/1111)	•		

# You can vote wherever you are.

- 1. Fill out your form completely and accurately.
  - Your U.S. address is used to determine where you are eligible to vote absentee. For military voters, it is usually your last address in your state of legal residence. For overseas citizens, it is usually the last place you lived before moving overseas. You do not need to have any current ties with this address. DO NOT write a PO Box # in section 2.
  - Most states allow you to provide a Driver's License number or the last 4 digits of your SSN. New Mexico, Tennessee, and Virginia require a full SSN.
  - If you cannot receive mail at your current mailing address, please specify a mail forwarding address.
  - Many states require you to specify a political party to vote in primary elections. This information may be used to register you with a party.
  - Section 6 Requirements: If your voting residence is Vermont, you must acknowledge the following by writing in section 6: "I swear or affirm that I have taken the Vermont Voter's Oath."
    If your voting residence is in Puerto Rico, you must list your mother's and father's first name.
  - We recommend that you complete and submit this form every year while you are an absentee voter.

## 2. Remember to sign this form!

- 3. Return this form to your election official. You can find their contact information at FVAP.gov.
  - Remove the adhesive liner from the top and sides. Fold and seal tightly. If you printed the form, fold it and seal it in an envelope.
  - All states accept this form by mail and many states accept this form by email and fax. See your state's guidelines at FVAP.gov.

#### Agency Disclosure Statement

The public reporting burden for this collection of information, OMB Control Number 0704-0503, is estimated to average 15 mintues per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or burden reduction suggestions to the Department of Defense, Washington Headquarters Services, at whs.mc-alex.esd.mbx.dd-dod-informationcollections@mail.mil. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number. DO NOT SUBMIT YOUR FORM TO THE E-MAIL ADDRESS ABOVE.

### Privacy Advisory

When completed, this form contains personally identifiable information and is protected by the Privacy Act of 1974, as amended.

Questions? Email: vote@fvap.gov

(Fill in the address of your election office. The address can be found online at FVAP.gov.)

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

OFFICIAL ABSENTEE BALLOTING MATERIAL – FIRST CLASS MAIL



International airmail postage is required if not mailed using the J.S. Postal Service, APO/FPO/DPO system, or diplomatic pouch.

**NOIVA AA9** 

U.S. Postage Paid 39 USC 3406



From (Your name and mailing address)