

STATE OF IOWA OFFICIAL VOTER REGISTRATION FORM

Revised 4/9/2014

In Iowa, you are not qualified to vote if you have been convicted of a felony and have not received a restoration of voting rights. You may apply to the Governor to restore your voting rights.

- Qualifications**
1. Are you a citizen of the United States? Yes No
 2. Will you be 18 years of age on or before Election Day? Yes No

If you answered "No" to either of these questions, do not complete this form.

ID Number
Provide your Iowa driver's license, non-operator ID number, or the last 4 digits of your Social Security number if you have one.

IA driver's license #: _____

IA non-operator ID #: _____

Last 4 digits of Social Security number: XXX-XX-_____

I do not have an IA driver's license, non-operator ID, or Social Security number.

Additional Information
Date of birth and gender are required.

Date of Birth (month, day, year) _____ / _____ / _____

Gender Male Female

Phone and/or Email (optional) _____

Your Name

Last _____

First _____

Middle _____ Suffix _____

Address Where You Live

Street Address (include apt., lot, etc.) _____

City _____ Zip _____ County _____

If homeless or you do not have an established residence, describe where you reside: _____

Where You Receive Mail (if different)

Address/P.O. Box _____

City _____ State _____ Zip _____

Previous Voter Registration Information

Your name was _____

Your address was _____

Your city and state were _____ Your zip was _____

Political Affiliation (check only one)

Political Parties: No Party Democratic Republican

Non-Party Political Organizations: Green Libertarian

WARNING
If you sign this form and you know the information is not true, you may be convicted of perjury and fined up to \$7,500 and/or jailed for up to 5 years.

Registrant Affidavit

I swear or affirm under penalty of perjury that:

- I am the person named above.
- I am a citizen of the United States.
- I have not been convicted of a felony (or I have received a restoration of rights).
- I am at least 17 ½ years old.
- I live at the address listed above.
- I am not currently judged by a court to be "incompetent to vote."
- I do not claim the right to vote anywhere else.

Signature _____ Date _____

STATE OF IOWA OFFICIAL ABSENTEE BALLOT REQUEST FORM

FOR OFFICE USE ONLY

| | | |
|---|---|--|
| YOUR NAME AND DATE OF BIRTH | Last | Suffix |
| | First | Middle |
| | Date of Birth (month, day, year) _____/_____/_____ | |
| ID NUMBER Complete one | Iowa Driver's License or Non-Operator ID Number: _____ OR Four-digit Voter PIN (can be found on Voter Identification Card): _____ | |
| | Voters who do not appear in the Iowa Dept. of Transportation's Driver's License or Non-Operator ID files are mailed an Iowa Voter Identification Card at the time of registration. Any voter may request a Voter Identification Card. | |
| YOUR IOWA RESIDENTIAL ADDRESS | Home Street Address (include apt, lot, etc. if applicable) _____ | |
| | City | Zip County |
| | You must be registered to vote in the county to receive an absentee ballot. If you are registered to vote in the county, this form will be used to update your voter registration if the information provided on this form is different than the information on your registration record. | |
| WHERE YOUR ABSENTEE BALLOT SHOULD BE MAILED If different than above | Mailing Address/P.O. Box _____ | |
| | City | State Zip |
| | Country (other than USA) _____ | |
| CONTACT INFO Important | Phone | Email <input type="checkbox"/> Do not add this contact info to my voter record |
| ELECTION DATE OR TYPE Choose only one election. | Election Date: _____/_____/_____ | |
| PRIMARY ELECTION ONLY | OR <input type="checkbox"/> General <input type="checkbox"/> Primary <input type="checkbox"/> City/School <input type="checkbox"/> Special: _____ | |
| | Check one political party <input type="checkbox"/> Democratic <input type="checkbox"/> Republican | |
| REQUESTER AFFIDAVIT Powers of attorney do not have legal authority to request an absentee ballot on behalf of another. | I swear or affirm that I am the person named above and I am a registered voter or I am entitled to register at the address listed on this form. I am eligible to receive and vote an absentee ballot for the election indicated above. | |
| | Signature: X | Date |

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| | Signature: X | Date |

Iowa Auditors Addresses

Scott County Auditor

Attn. Absentee Request Form

600 W.4th Street

Davenport IA 52801-1030

Clinton County Auditor

Po Box 2957

Clinton IA 52733-2957

Muscatine County Auditor

414 E. Third Street

Suite 201

Muscatine IA 52761

Jackson County Auditor

201 W. Platt Street

Maquoketa IA 52060

Cedar County Auditor

400 Cedar Street

Tipton IA 52772