



# MONTANA VOTER REGISTRATION APPLICATION

Fields marked with an asterisk (\*) are required. If you do not provide all of the required information, your application to register to vote will not be complete. **UNDER FEDERAL AND/OR STATE LAW ALL ELECTORS MUST PRESENT ID WHEN VOTING.** Please type or print clearly using black or blue ink. **COMPLETE FORM AND SUBMIT TO COUNTY ELECTION OFFICE.**

## ELIGIBILITY REQUIREMENTS AND IDENTIFYING INFORMATION

**NOTE: VOTER REGISTRATION REQUIRES U.S. CITIZENSHIP**

**1** Check all that apply:      New Registration      Name Change      Address Change      Signature Update      Other

**2** Are you a citizen of the United States?\*      Yes      No  
Will you be at least 18 years of age on or before the next election?\*      Yes      No  
Will you be a Montana resident for at least 30 days before the next election?\*      Yes      No  
**if you checked "No" in response to any of these questions, do not complete this form.**

**3** Last Name\*      First Name\*      Middle Name      Suffix (Jr., Sr., Etc.)

**4** Date of Birth\*      Contact Phone Number      Email Address  
\_\_\_\_/\_\_\_\_/\_\_\_\_  
month      day      year

**5** Select one of the following and provide the required information\*  
**I have a Montana Driver's License or Montana ID and that number is \_\_\_\_\_**  
**I do not have a Montana Driver's License or MT ID card. The last 4 digits of my SSN are \_\_\_\_\_**  
I do not have a Montana Driver's License or MT ID card, or a Social Security Number. I have attached a copy of a photo ID that shows my name, or acceptable ID that shows my name and current address (*paycheck stub; utility bill; bank statement; or government document*).  
*ID numbers provided above are kept confidential and are not available for public inspection.*

**6** Montana Residence Address\*      City\*      County\*      Zip Code\*

**7** Mailing Address (required if differs from residence address)      City      State      Zip Code

**8** If applicable, check one of the following:  
Military Domestic (or military spouse or dependent) – only if on active duty and will be absent from place of registration  
Military Overseas (or overseas military spouse or dependent)      U.S. Citizen Overseas

### PREVIOUS REGISTRATION INFORMATION – will be used to provide cancellation information to former jurisdiction REQUIRED IF NAME CHANGED OR IF PREVIOUSLY REGISTERED TO VOTE IN ANOTHER MT COUNTY OR IN ANOTHER STATE

**9** Previous City, County and State      Residence Address of Previous Registration      Previous Registration Name

## RECEIVE YOUR BALLOT IN THE MAIL

**Yes,** I request an absentee ballot to be mailed to me for all elections in which I am eligible to vote as long as I reside at the address listed on this application. I understand that in order to continue to receive an absentee ballot, I must complete, sign, and return an address confirmation notice mailed to me by the county election office in January of each even-numbered year.

**If your mailing address differs during certain times of the year please add the seasonal mailing address information in this space, or contact your county election office.      Seasonal mailing address for the period of**

\_\_\_\_/\_\_\_\_/\_\_\_\_ through \_\_\_\_/\_\_\_\_/\_\_\_\_      Seasonal Mailing Address:

## APPLICANT AFFIRMATION

*I affirm under penalty of perjury that the information on this application is true, that I am a citizen of the United States, that I will be at least 18 years old on or before the next election, that I will have been a resident of Montana for at least 30 days prior to the next election, and that I am not serving a felony conviction in a penal institution nor have been found to be of unsound mind by a court. I understand that if I have given false information on this application, I may be subject to a fine or imprisonment, or both, under federal and/or state law.*

Signature\*      Date\*

THE AFFIRMATION ON THIS APPLICATION FOR VOTER REGISTRATION MUST BE SIGNED BY THE APPLICANT – FAILURE TO DO SO WILL PREVENT APPLICATION FROM BEING PROCESSED.

For county use only

Date      Senate      House      Precinct / Split      Ward      School      6/2015

*(Fold and tape closed)*

Place  
Stamp  
Here



\_\_\_\_\_ MT

FLATHEAD COUNTY ELECTIONS

40 11TH ST W #230

KALISPELL, MT 59901-5799