

MISSISSIPPI MAIL-IN VOTER REGISTRATION APPLICATION

Agency Code: _____

- You can use this form to: register to vote in Mississippi or change your name and/or address.
- If you are registering for the first time in Mississippi and DO NOT have a Mississippi driver's license or social security number, you must send with this application a copy of a current and valid photo ID or a copy of a current utility bill, bank statement, government check, paycheck or other government document that shows your name and address in this county.
- An application for voter registration must be postmarked or hand delivered to the Circuit Clerk's Office located in the county of your voting residence no later than 30 days before an election.
- You may not register to vote if you have been convicted in a Mississippi state court of any of the following crimes: voter fraud, murder, rape, bribery, theft, arson, obtaining money or goods under false pretense, perjury, forgery, embezzlement, bigamy, armed robbery, extortion, felony bad check, felony shoplifting, larceny, receiving stolen property, robbery, timber larceny, unlawful taking of a motor vehicle, statutory rape, carjacking or larceny under lease or rental agreement.
- If you live in an area without house numbers or street names, please include a drawing of your location to enable us to identify your appropriate voting precinct.
- Photo ID Required to Vote: You will be required to present an acceptable form of photo identification when you vote at your polling place on Election Day or by absentee ballot in your Circuit Clerk's Office, unless exempted by law. For more information, go to www.MSVoterID.ms.gov or call (844) 678-6837.

Check One: <input type="checkbox"/> New Registration <input type="checkbox"/> Change of Information	Are you a citizen of the United States of America? Yes <input type="checkbox"/> No <input type="checkbox"/> Will you be 18 years of age on or before Election Day? Yes <input type="checkbox"/> No <input type="checkbox"/> NOTE: If you checked 'No' in response to either of these questions, DO NOT complete this form. Would you like to serve as an Election Day poll worker? Yes <input type="checkbox"/> No <input type="checkbox"/>				
Name	Last Name	Maiden Name	First Name	Middle Name	Suffix
Physical Home Address (Where you live)	Number and Street/Road/Dorm/Apt #				
	City	County	State: MS	Zip	
Mailing Address (If different from above)	Street or Post Office Box				
	City	County	State:	Zip	
Date of Birth	Month	Day	Year	MS Driver's License Number or Last 4 Digits of your Social Security Number _____ or _ _ _ _	
Phone #	Cell ()	Work ()			
Email					
Previous Registration	Name		Address		
	City	County	State:	Zip	

VOTER DECLARATION- Read and Sign

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

- I am a U.S. citizen.
- I will be 18 years of age on or before the next general Election Day.
- I am a resident of Mississippi, this county and this city for at least 30 days.
- I have not been adjudicated as mentally incompetent.
- I have never been convicted of voter fraud or any other disenfranchising crime OR, if convicted, I have had my voting rights restored as required by law.
- The address listed above is my legal place of residence.

WARNING: Giving false information to register to vote is a felony punishable by a fine of not more than \$5,000 or imprisonment for not more than 5 years, or both. Miss. Code Ann. § 23-15-17.

X _____ **Date:** _____
Signature (or mark) of applicant

X _____ **Date:** _____
If applicant is unable to sign, the person who assisted the applicant

Address