REMOVE TO EXPOSE ADHESIVE

Minnesota Voter Registration Application

Complete lines 1 through 8. Please print clearly.

Personal Information & Qualifications

1. Are you a U.S. citizen? Yes ☐ No ☐

2. Will you be at least 18 on or before the next election? Yes ☐ No ☐

If you mark "NO" to either of these questions, DO NOT complete this form.

IP
M
AB
election office use only

3. last name or surname | first name | middle name | suffix (Jr., Sr., II, III)

4. address where you live (residence) | apt. number | city | zip code

5. if mail cannot be delivered to the address above, provide P.O. Box | city | zip code

6. date of birth (not today's date) ____ – ____ – 19____ | school district (if known) | county where you live

phone number ____ – ____ – ____ | email address

7. mark one box and provide the number that applies to you:

☐ I have a MN-issued driver's license or MN ID card number: ☐☐☐☐☐☐☐☐☐☐☐☐☐

☐ I do not have a MN-issued driver's license or MN ID card.
The last four digits of my Social Security Number are: XXX-XX- ☐☐☐☐

☐ I do not have a MN-issued driver's license, a MN-issued ID card, or a Social Security Number.

Registration Updates - Are you currently registered under a different name or address?

previous last name | previous first name | previous middle name

previous address where you were last registered | city | state | zip code

Read And Sign Only If All Parts Apply To You.

8. I certify that I:

- will be at least 18 years old on election day;
- am a citizen of the United States;
- will have resided in Minnesota for 20 days immediately preceding election day;
- maintain residence at the address given on the registration form;
- am not under court-ordered guardianship in which the court order revokes my right to vote;
- have not been found by a court to be legally incompetent to vote;
- have the right to vote because, if I have been convicted of a felony, my felony sentence has expired (been completed) or I have been discharged from my sentence; and
- have read and understand this statement, that giving false information is a felony punishable by not more than 5 years imprisonment or a fine of not more than $10,000, or both.

sign here **X**_____ date: ____-____-20____

Election Judge Official Use Only

W_____
P_____
SD_____
Initials_____

ID With Current Address
ID Number: _____
☐ MN Drivers License, Learners Permit, MN ID Card, or Receipt
☐ Tribal ID

Photo ID With Utility Bill or Fee Statement
Student Fee Statement or Utility Bill
(type)_____
ID Number: _____
☐ MN Drivers License ☐ MN ID Card
☐ U.S. Passport ☐ U.S. Military ID
☐ Tribal ID ☐ Student ID

Other
☐ Vouched For
☐ Late Notice
☐ Previous Registration in Same Precinct
☐ Student ID With College List
ID Number: _____

POST OFFICE WILL NOT DELIVER WITHOUT FIRST CLASS POSTAGE

RETURN TO: Hubbard County
Auditor/Treasurer's Office
301 Court Avenue
Park Rapids, MN 56470-1483

For more information on voting, registering to vote, finding your polling place, state election results, campaign information, or conducting elections, go to the Minnesota Secretary of State web site at **www.sos.state.mn.us** or call toll free **1-877-600-VOTE (1-877-600-8683)**. For a TTY/TTD (deaf and hard of hearing) communication, contact the Minnesota Relay Service at 1-800-627-3529 or 711

Deadline Information

You may pre-register to vote at any time at least 20 days before an election. If you are not able to pre-register prior to the 20 days before an election, you must register at your polling place to vote on Election Day.

Voter registration applications must be turned in to the County Auditor or Secretary of State within 10 days of being signed.

Assistance

Large-type Minnesota Voter Registration Applications are available upon request from your County Auditor or the Office of the Secretary of State.

Special assistance available to those who are elderly, have disabilities, or are in health care facilities. Contact the Secretary of State or your County Auditor for more information.

Voter Registration Applications are available in other languages at **www.sos.state.mn.us**.

Your Social Security number is not public. Before providing the last 4 digits of your SSN in box 7, please read the privacy notice at www.sos.state.mn.us/home/index.asp?page=207.