

For office use only ↓

Polling Place	Date	Pct	Ward	School	House	Senate	Reg. #
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TO REGISTER: All items, except where noted, must be completed to register to vote.

Under federal and/or state law, all electors must present ID when voting.

1. Are you a citizen of the United States of America? Yes No\*

2. Will you be 18 years of age on or before election day? Yes No\*

\*Note: If you checked 'no' in response to either of these questions, do not complete this form.

3. MONTANA DRIVER'S LICENSE # OR STATE ID \_\_\_\_\_

You MUST provide your driver's license number, if you have a driver's license. If you do not have a driver's license, list the last four digits of your Social Security number on the line above. If you have neither a driver's license nor a Social Security number, provide (in person) or enclose (by mail) a copy of one of the following: any photo ID with your name; OR a current utility bill, bank statement, paycheck, government check, or other government document that shows your name and current address.

4. Email Address (optional) \_\_\_\_\_

5. NAME 

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(Please print) Last First Middle

6. COUNTY \_\_\_\_\_

9. TELEPHONE NUMBER \_\_\_\_\_

7. ADDRESS WHERE YOU LIVE\* \_\_\_\_\_

\*Precinct is determined by address where you live.

10. DATE OF BIRTH \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month Day Year

(Street, City, Zip OR Sec., Twp. & Range)

11. PRINT FORMER NAME (if changed) \_\_\_\_\_

8. MAILING ADDRESS (if different than #7) \_\_\_\_\_

12. PLACE LAST REGISTERED \_\_\_\_\_

CITY COUNTY STATE

13. VOTER DECLARATION (Read and sign below)

I swear/affirm that: a) I am a U.S. citizen; b) I will be at least 18 years old on or before the next election; c) I will have lived in this county for at least 30 days before the next election (unless I am exempt under 13-2-514(2), MCA); d) I am neither in a penal institution for a felony conviction nor found of unsound mind by a court; e) If I do not now meet these qualifications, I will by next election; and f) I have provided true information, to the best of my knowledge under penalty of perjury. If I have given false information, I may be subject to a fine or imprisonment or both under Federal or State laws.

14. SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

(FOLD AT LINE)

### PERMANENT ABSENTEE MAILING LIST

Optional: I request an absentee ballot to be mailed to me, for as long as I reside at the address listed above:

[ ] for each subsequent election in which I am eligible to vote.

[ ] only for each subsequent federal election in which I am eligible to vote.

I understand that in order to remain on the permanent absentee list, I must complete, sign and return a confirmation form that will be mailed to me in January and July of each year.

#### MAKE SURE TO....

- √ **Completely** fill out the card.
- √ Tape the registration card shut.
- √ Mail the card within 15 days of signing it.

(Fold and tape closed here)

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Place  
Stamp  
Here

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ELECTION ADMINISTRATOR  
MISSOULA COUNTY  
200 W BROADWAY  
MISSOULA MT 59802

