

# NEW HAMPSHIRE MAIL-IN VOTER REGISTRATION APPLICATION

Shaded Areas Not Required

You can use this form to: • register to vote • report that your name or address has changed • register with a party Please print in blue or black ink				This space is for official use only.			
<b>1</b>	Mr. Mrs. Miss. Ms.	Last Name	First Name	Middle Name(s)	(Circle one) Jr Sr II III IV		
<b>2</b>	Address (see instructions) — Street (or route and box number)		Apt., or Lot #	City/Town	State	Zip Code	
<b>3</b>	Address Where You Get Your Mail If Different From Above (see instructions)			City/Town	State	Zip Code	
<b>4</b>	Date of Birth <u>    </u> / <u>    </u> / <u>    </u> Month Day Year	<b>5</b>	Telephone Number (optional)		<b>6</b>	ID Number (see item 6 in the instructions for your State)	
<b>7</b>	Choice of Party (see Item 7 in the instructions for your State)				<b>8</b>	Race or Ethnic Group (see item 8 in the instructions for your State)	
<b>9</b>	I swear/affirm that: • I am a United States citizen • I meet the eligibility requirements of my state and subscribe to any oath required. (See item 9 in the instructions for your state before you sign.) • The information I have provided is true to the best of my knowledge under penalty of perjury. If I have provided false information, I may be subject to a fine or imprisonment or both under Federal or State laws.				Please sign full name (or put mark) ↓  <b>X</b> _____  Date: <u>    </u> / <u>    </u> / <u>    </u> Month Day Year		
<b>10</b>	If the applicant is unable to sign, who helped the applicant fill out this application? Give name, address and phone number (phone number optional).						

Fold here

**Please fill out the sections below if they apply to you.**

If this application is for a **change of name**, what was your name before you changed it?

<b>A</b>	Mr. Mrs. Miss. Ms.	Last Name	First Name	Middle Name(s)	(Circle one) Jr Sr II III IV
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If you were registered before but this is the first time you are registering from the address in Box 2, what was your address where you were registered before?

<b>B</b>	Street (or route and box number)	Apt., or Lot #	City/Town	State	Zip Code
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If you live in a rural area but do not have a street number, or if you have no address, please show on the map where you live.

<b>C</b>	<ul style="list-style-type: none"> <li>Write in the names of the crossroads (or streets) nearest to where you live.</li> <li>Draw an <b>X</b> to show where you live.</li> <li>Use a dot to show any schools, churches, stores, or other landmarks near where you live, and write the name of the landmark.</li> </ul>	NORTH ↑									
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%; padding: 2px;">Example</td> <td style="width: 5%; text-align: center; vertical-align: middle;">Route #2</td> <td style="width: 75%; padding: 2px;">*Grocery Store</td> </tr> <tr> <td style="padding: 2px;">Public School*</td> <td style="text-align: center; vertical-align: middle;">Route #2</td> <td style="padding: 2px;">Woodchuck Road</td> </tr> <tr> <td></td> <td></td> <td style="text-align: center; vertical-align: middle;"><b>X</b></td> </tr> </table>	Example	Route #2	*Grocery Store	Public School*	Route #2	Woodchuck Road			<b>X</b>	
Example	Route #2	*Grocery Store									
Public School*	Route #2	Woodchuck Road									
		<b>X</b>									

DD Form 2644, NOV 94

New Hampshire town and city clerks will accept this application only as a request for their own absentee voter mail-in registration form. You need to fill in only Box 1 and Box 2 or 3. The application should be mailed to your town or city clerk at your zip code or to:

State House  
Room 204  
Concord, NH 03301

It should be mailed in plenty of time for your town or city clerk to mail to you their own form and for you to return that form to them by 10 days before the election.

Assistance and questions may be addressed to the next higher command or to the Federal Voting Assistance Program at 800-438-8683 or e-mail at [nvra@fvap.ncr.gov](mailto:nvra@fvap.ncr.gov).