# **State Instructions**

#### California

**Registration Deadline** — 15 days before the election.

- **6. ID Number** When you register to vote, you must provide your California driver's license or California identification card number, if you have one. If you do not have a driver's license or ID card, you must provide the last four digits of your Social Security Number (SSN). If you do not include this information, you will be required to provide identification when you vote.
- **7. Choice of Party**. Please enter the name of the political party with which you wish to register. If you do not wish to register with any party, enter "Decline to State" in the space provided.

California law allows voters who "decline to state" an affiliation with a qualified political party or who affiliate with a nonqualified political party to vote in the primary election of any qualified political party that files a notice with the Secretary of State allowing them to do so. You can call 1-800-345-VOTE or visit www.ss.ca.gov to learn which political parties are allowing nonaffiliated voters to participate in their primary election.

- **8. Race or Ethnic Group**. Leave blank.
- **9. Signature**. To register in California you must:
- be a citizen of the United States
- be a resident of California
- be at least 18 years of age at the time of the next election
- not be imprisoned or on parole for the conviction of a felony
- not currently be judged mentally incompetent by a court of law Signature is required. If you meet the requirements listed above, please sign and date the registration card in the space provided.

## Attention: Proof of Voter Identifica-

(Pursuant to the Help America Vote Act of 2002)

### Voting in person:

- A <u>first-time</u> voter who registers by mail must present to the appropriate state or local election official:
- 1) a current and valid photo identification; or

2) a current utility bill, bank statement, government check, paycheck, or other government document that shows the name and address of the voter.

#### Voting by mail:

- A <u>first-time</u> voter who registers by mail must submit a **COPY** of one of the following documents with his or her absentee ballot:
- 1) current and valid photo identification;  $\mathbf{OR}$
- 2) current utility bill, bank statement, government check, paycheck, or other government document that shows the name and address of the voter.

#### For Those Who Register by Mail:

Persons who register to vote by mail and submit a driver's license number that the state or local election official can match with an existing state identification record will not be required to provide identification when they vote. Additionally, voters will not be required to provide identification when they vote if they are: (i) provided the right to vote otherwise than in person under the Voting Accessibility for the Elderly and Handicapped Act; or (ii) entitled to vote otherwise than in person under any other Federal law.

These identification requirements only apply to elections in which there is a federal office on the ballot. If you do not provide proof of identification, you may cast a provisional ballot.

#### Mailing address:

Riverside County Registrar of Voters 2724 Gateway Drive Riverside, CA 92507

Special Note: The State of California requires the voters State or Country of birth in order to be validly registered. The attached Federal Form is missing this required field. Please print your State or Country of birth underneath the line in Box 6 in order to make your voter registration valid.

**Voter Registration Application**Before completing this form, review the General, Application, and State specific instructions.

Are	you a citizen of the	e United States	of America	? Yes	[	No		This spa	ace for office use	only.		
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2	Home Address				Apt. or Lot #			City/Town		State	Zip Code	
3	Address Where You Get Your Mail If Different Fro				Above			City/Town		State	Zip Code	
	Date of Birth			Telephone Nun	nber (option	al)		ID Numb	er - (See Item 6 in t	ne instructions for your	state)	
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7	Choice of Party			Race or Ethnic Group (see item 8 in the instructions for your State								
<b>"</b>	(see item 7 in the instru	ctions for your State)	8	(see item 8 in the in:	structions for yo	ur State)						
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B Street (or route and box number)					Typi: or Zot ii City/10			77 TOWN/County		Otato	Zip Godo	
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■ Draw an X to show where you live.												
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lf t	If the applicant is unable to sign, who helped the applicant fill out this application? Give name, address and phone number (phone number optional).											
1												

Mail this application to the address provided for your State.

FOR OFFICIAL USE ONLY							

FIRST CLASS STAMP NECESSARY FOR MAILING



KARI VERJIL

REGISTRAR OF VOTERS

2724 GATEWAY DR

RIVERSIDE CA 92507-0918