

Texas Voter Registration Application	For Official Use Only
VR17.11E13	

Please mail this application to:

**REGISTRAR OF VOTERS
P.O. BOX 3527
HOUSTON , TX 77253-3527**

1

Application Type: ___ New ___ Change ___ Replacement

Are you a United States Citizen? Yes
Are you interested in serving as an election worker? No

Continue below to complete application.

2 Last Name	First Name	Middle Name (If Any)	Former Name	
3 Residence Address: Street Address and Apartment Number. <small>If none, describe where you live. (Do not include P.O. Box, Rural Rt. or Business Address)</small>	City	County HARRIS	State TX	Zip Code
4 Mailing Address: Street Address and Apartment Number (If mail cannot be delivered to your residence address.)		City	State	Zip Code
5 Date of Birth: (mm/dd/yyyy)	6 Gender (Optional)	7 Telephone Number, Include Area Code (Optional)		

8 TX Driver's License No. or Texas Personal I.D. No. <small>(Issued by the Department of Public Safety)</small>	If no TX Driver's License or Personal Identification, give last four digits of your Social Security Number
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I have not been issued a TX Driver's License/Personal Identification Number or Social Security Number.

9 I understand that giving false information to procure a voter registration is perjury, and a crime under state and federal law. Conviction of this crime may result in imprisonment up to 180 days, a fine up to \$2,000, or both. Please read all three statements to affirm before signing.

- I am a resident of this county and U.S. Citizen;
- I have not been finally convicted of a felony, or if a felon, I have completed all of my punishment including any term of incarceration, parole, supervision, period of probation, or I have been pardoned; and
- I have not been determined by a final judgment of a court exercising probate jurisdiction to be totally mentally incapacitated or partially mentally incapacitated without the right to vote.

X

____ / ____ / ____
Date

Signature of Applicant or Agent and Relationship to Applicant or Printed Name of Applicant if Signed by Witness and Date.