## ILLINOIS VOTER REGISTRATION APPLICATION - Jersey County, Illinois

New Registration

Change Address Change Name 

THE OR PRINT CLEARLY IN BLACK OR BLOE INK				
Are you a citizen of the United States of America?			YES	NO
Will you be 18 years of age on or before the next General Election Day?			YES	NO
If you checked "no" to either of these questions, then do not complete this form.				
Last Name First I	First Name			Suffix (Jr. Sr. II)
Residence Address (House Number, Street Name, Apt)	City		State	Zip Code
Mailing Address (if different than residence address)	City		State	Zip Code
Complete Former Registration Address		Former County	Former Name	
Date of Birth: MM/DD/YYYY	Phone Numb	er:	Sex:	
			M F	
IL Driver's License or State ID Number			Last 4 Digits of S	SN

Voter Affidavit – Read all statements and sign within the box. By signing, I swear or affirm that:

- I am a citizen of the United States. •
- I will be at least 18 years of age on or before the next General . Election Day.
- I have lived in the State of Illinois and in my Election precinct . at least 30 days as of the date of the next election.
- The information I have provided is true to the best of my ٠ knowledge. I understand that if I provide false information I may be fined, imprisoned, or if I am not a US Citizen, deported from or refused entry into the United States.

TODAY'S DATE:\_\_\_\_\_\_ REGISTRAR INITIALS:\_\_\_\_