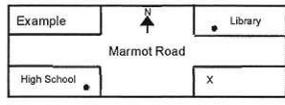
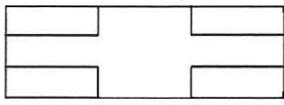


	<h1 style="margin:0;">Wisconsin Voter Registration Application</h1>						<input type="radio"/> Submitted by Mail <small>(Official Use Only)</small>	
Confidential Elector ID# <small>(HINDI - sequential #) (Office Use Only)</small>				WisVote ID # <small>(Office Use Only)</small>				
<b>Instructions</b>	<p><b>Instructions for completion are on the back of this form. Return this form to your municipal clerk, unless directed otherwise.</b></p> <p> Proof of Residence (see reverse) must accompany this application unless you are a military or permanent overseas voter. If this is a change of address, upon completion of this application your voting rights will be cancelled at your previous residence. Please print your information clearly and legibly. Fill in circles as applicable.</p>							
<b>1</b>	<input type="radio"/> New WI Voter <input type="radio"/> Name Change <input type="radio"/> Address Change	Municipality <input type="radio"/> Town <input type="radio"/> Village <input type="radio"/> City  County						
<b>2</b>	WI Driver License or WI DOT-issued ID # (Req. if not expired or cancelled)				Expiration Date / /		<input type="radio"/> I have neither a WI Driver License/ ID nor a Social Security Number.	
	Social Security Number - Last Four Digits (Req. if driver license or state ID is not issued, has expired, or has been cancelled)				X X X - X X -			
<b>3</b>	<b>Current</b>	Last Name			First Name			
		Middle Name		Suffix (e.g. Jr, II, etc.)		Phone #		
		Date of Birth (M/D/YYYY)			Email Address			
		If you are a military or permanent overseas elector, fill in the appropriate circle (see instructions for definitions) <input type="radio"/> Military <input type="radio"/> Permanent Overseas						
<b>4</b>		Residence Address: Street Number & Name						
	Apt. Number		City			State & ZIP		
<b>5</b>	Mailing Address: Street Number & Name							
	Apt. Number		City			State & ZIP		
<b>6</b>	<b>Previous</b>	Last Name			First Name			
		Middle Name		Suffix (e.g. Jr, II, etc.)				
<b>7</b>		Previous Address: Street Number & Name						
	Apt. Number		City			State & ZIP		
<b>8</b>	Accommodation needed at poll location (e.g. wheelchair access):			If you do not have a street number or address, use the map to show where you live.				
	<input type="radio"/> I am interested in being a poll worker.			<ul style="list-style-type: none"> <li>• Mark crossroads</li> <li>• 'X' where you live</li> <li>• Use dots for landmarks</li> </ul>				
<b>9</b>	Please answer the following questions by filling in "Yes" or "No" <div style="display: flex; justify-content: space-between; align-items: flex-start; margin-top: 5px;"> <div style="width: 60%;"> <p>1. Are you a citizen of the United States of America? <input type="radio"/> Yes <input type="radio"/> No</p> <p>2. Will you be 18 years of age or older on or before the first election at which you will offer to vote? <input type="radio"/> Yes <input type="radio"/> No</p> </div> <div style="width: 35%; text-align: right;"> <p><b>If you filled in "No" in response to EITHER of these questions, do <u>not</u> complete this form.</b></p> </div> </div>							
<b>10</b>	I hereby certify, to the best of my knowledge, that I am a qualified elector, a U.S. citizen, at least 18 years old or will be at least 18 years old at the time of the first election at which I will offer to vote, having resided at the above residential address for at least 10 consecutive days immediately preceding this election, with no present intent to move. I am not currently serving a sentence including incarceration, parole, probation, or extended supervision for a felony conviction, and not otherwise disqualified from voting. I certify that all statements on this form are true and correct. If I have provided false information I may be subject to fine or imprisonment under State and Federal laws. <b>If completed on Election Day:</b> I further certify that I have not voted in this election. <b>Please sign below to acknowledge that you have read and understand the above.</b>							
<b>11</b>	Elector Signature <b>X</b>		Today's Date / /		Proof of Residence Type (Official use only)		Proof of Residence Issuing Entity (Official use only)	
					Proof of Residence # (Official Use Only)		Election Day Voter # (Official Use Only)	
<b>Falsification of information on this form is punishable under Wisconsin law as a Class I felony.</b>								
<b>12</b>	Assistant Signature:			Assistant Address:				
Official's Signature:				Date Complete & POR Received / /		SRDs printed name and SRD#:		
Ward	Sch. District	Alder	Ctv. Suor.	Ct. of App.	Assembly	St. Senate	Congress	