Voter Registration and Absentee Ballot Request

Federal Post Card Application (FPCA)

Print clearly in blue or black ink, please see back for instructions

This form is for absent Uniformed Service members, their families, and citizens residing outside the United States. It is used to register to vote, request an absentee ballot, and update your contact information. See your state's instructions at FVAP.gov.

Timo are your rick					
I request an absentee ballot for all elections	☐ I am an eligible spouse or dependent of an active duty member of the Uniformed Services or Merchant Marine.				
in which I am eligible					
to vote AND:	☐ I am a U.S. citizen living outsid	e the country.		Cav	□ Female
Last name		Suffix (Jr., II)		Sex	■ Male
First name		Previous names (if applicable)			
Middle name		Birth date (MM/DD/YYYY)	/	/	
Social Security Number		Driver's license or State ID #			
2. What is your addre	ess in the U.S. state or territory	where you are registering to vote and re	questing an	absentee	ballot?
Your voting materials wi	Il not be sent to this address. See in	nstructions on other side of form.			
Street address		Apt #			
City, town, village		State			
County		ZIP			
3. Where are you now	v? You MUST give your CURRE	NT address to receive your voting materia	als.		
Your mailing address. (D	oifferent from above)	Your mail forwarding address. (If o	different from r	mailing add	dress)
4. What is your conta	ct information? This is so elect	ion officials can reach you about your rec	uest.		
Provide the country code	e and area code with your phone a	nd fax number. Do not use a Defense Switched	Network (DSN	N) number.	
Email:		Phone:			
Alternate email:		Fax:			
5. What are your pref	ferences for upcoming election	s?			
A. How do you want to revoting materials from you election office? (Select Or	r	B. What is your political party for primary elections?			
6. What additional in	formation must you provide?				
	It require more information, see ba to clarify your voter information.	ck for instructions. Additional state instruction	s may be found	d at FVAP.	gov. You

7. You must read and sign this statement.

I swear or affirm, under penalty of perjury, that:

- The information on this form is true, accurate, and complete to the best of my knowledge. I understand that a material misstatement of fact in completion of this document may constitute grounds for conviction of perjury.
- I am a U.S. citizen, at least 18 years of age (or will be by the day of the election), eligible to vote in the requested jurisdiction, and
- I am not disqualified to vote due to having been convicted of a felony or other disqualifying offense, nor have I been adjudicated mentally incompetent; or if so, my voting rights have been reinstated; and
- I am not registering, requesting a ballot, or voting in any other jurisdiction in the United States, except the jurisdiction cited in this voting form.







You can vote wherever you are.

1. Fill out your form completely and accurately.

- Your U.S. address is used to determine where you are eligible to vote absentee. For military voters, it is usually your last address in your state of legal residence. For overseas citizens, it is usually the last place you lived before moving overseas. You do not need to have any current ties with this address. DO NOT write a PO Box # in section 2.
- Most states allow you to provide a Driver's License number or the last 4 digits of your SSN. New Mexico, South Carolina, Tennessee, and Virginia require a full SSN.
- If you cannot receive mail at your mailing address, please specify a mail forwarding address.
- Most states require you to specify a political party to vote in primary elections. This information may be used to register you with a party.
- Section 6 Requirements: If your voting residence is Vermont, you must acknowledge the following by writing in section 6: "I swear or affirm that I have taken the Vermont Voter's Oath."
 If your voting residence is in Puerto Rico, you must list your mother's and father's first name.
- We recommend that you complete and submit this form every year while you are an absentee voter.

2. Remember to sign this form!

- Remove the adhesive liner from the top and sides.Fold and seal tightly. If you printed out the form yourself you can fold the form and seal it in an envelope.
 - You can find the address for your election office at FVAP.gov.
 - All states accept this form by mail, but they vary on email and fax.
 See your state's rules in the Voting Assistance Guide at FVAP.gov.

Agency Disclosure Statement

The public reporting burden for this collection of information, OMB Control Number 0704-0503, is estimated to average 15 mintues per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or burden reduction suggestions to the Department of Defense, Washington Headquarters Services, at whs.mc-alex.esd.mbx.dd-dod-informationcollections@mail.mil. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number. DO NOT SUBMIT YOUR FORM TO THE E-MAIL ADDRESS ABOVE.

Privacy Advisory

When completed, this form contains personally identifiable information and is protected by the Privacy Act of 1974, as amended.

Questions? Email vote@fvap.gov

(Fill in the address of your election office. The address can be found online at FVAP.gov.)

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NO POSTAGE NECESSARY IN THE U.S. MAIL - DMM 703.8.0

OFFICIAL ABSENTEE BALLOTING MATERIAL – FIRST CLASS MAIL



International airmail postage is required if not mailed using the

NOIVA AA9

U.S. Postage Paid 39 USC 3406



(Your name and mailing address)

From