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 guidelines at FVAP.gov.

1. Who are you? Pick one.		
ballot for all elections in which I am eligible I am a U.S. citizen living outside the cour I am a U.S. citizen living outside the cour	vices or Merchant Marine -OR- I am an eligible spouse or dependent. htry, and I intend to return. htry, and my intent to return is uncertain. htry, I have never lived in the United States.	
Last name	Suffix (Jr., II)	
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 address in the U.S. state or territory where you a	re registering to vote and requesting an absentee ballot?	
Your voting materials will not be sent to this address. See instructions on the other side of form.		
Street address	Apt #	
City, town, village	State	
County	ZIP	
3. Where are you now? You MUST give your CURRENT address to receive your voting materials.		
Your mailing address (Different from above)	Your mail forwarding address (If different from mailing address)	

4. What is your contact information? This is so election officials can reach you about your request.		
Provide the country code and area code with your phone and fax number. Do not use a Defense Switched Network (DSN) number.		
Email:	Phone:	
Alternate email:	Fax:	
5. What are your preferences for upcoming elections?		
A. How do you want to receiveImage: Mailvoting materials from yourImage: Email or onlineelection office? (Select One)Image: Fax	B. What is your political party for primary elections?	
6. What additional information must you provide?		

Puerto Rico and Vermont require more information, see back for instructions. *Additional state guidelines* may be found at FVAP.gov. You may also use this space to clarify your voter information.

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.



This information is for official use only. Any unauthorized release may be punishable by law. Previous editions are obsolete. Standard Form 76 (Rev.09-2021), OMB No. 0704-0503, NSN 7540-00-643-5053

(Your name and mailing address) **mor**



U.S. Postal Service, APO/FPO/DPO system, or diplomatic pouch. International airmail postage is required if not mailed using the

OFFICIAL ABSENTEE BALLOTING MATERIAL – FIRST CLASS MAIL

(Fill in the address of your election office. oT

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

tightly. If you printed the form, fold it and seal it in an envelope. • All states accept this form by mail and many states accept this

form by email and fax. See your state's guidelines at FVAP.gov.

- contact information at FVAP.gov. • Remove the adhesive liner from the top and sides. Fold and seal
- 2. Remember to sign this form! 3. Return this form to your election official. You can find their

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, Tennessee, and Virginia require a

· Many states require you to specify a political party to vote in primary elections. This information may be used to register you with a party.

• If you cannot receive mail at your current mailing address, please

• 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."

while you are an absentee voter.

You can vote wherever you are.

1. Fill out your form completely and accurately.

- · We recommend that you complete and submit this form every year

If your voting residence is in Puerto Rico, you must list your mother's and father's first name.

specify a mail forwarding address.

full SSN.

Agency Disclosure Statement

The public reporting burden for this collection of estimated to average 15 minutes per response, 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

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

information, OMB Control Number 0704-0503, is including the time for reviewing instructions, ADDRESS ABOVE.