

Voter Registration and Absentee Ballot Request Federal Post Card Application (FPCA)

For any questions about this form, consult the Voting Assistance Guide available in hard copy or on FVAP.gov or your Voting Assistance Officer.

For absent Uniformed Service members, their families, and citizens residing outside the U.S.

Please print in black ink.

Classification

Make only 1 selection.

(In most States, you must be absent from your voting district to use this form).

1 I request an absentee ballot for all elections in which I am eligible to vote AND:

I am a member of the Uniformed Services or Merchant Marine on active duty OR I am an eligible spouse or dependent.

I am an activated National Guard member on State orders.

I am a U.S. citizen residing outside the United States, and I intend to return.

I am a U.S. citizen residing outside the United States, and my return is not certain.

I am a U.S. citizen and have never resided in the United States.

Political party

2 Your State may require you to specify a political party to vote in primary elections:

Legal name

3 Last name Suffix

First name Middle name

Previous name (if applicable)

Identification

Some States require your full SSN. Check your State's pages in the Voting Assistance Guide on FVAP.gov.

4 State Driver's License or ID

OR Social Security Number

Birth date / / Sex M F Race

See instructions

Contact information

Include international prefixes. No DSN numbers.

5 Telephone

Fax

Email

Ballot receipt

6 Rank from 1-3 in order of preference; be sure appropriate contact information is provided above.

I prefer to receive my ballot, as permitted by my State, by: Email/Online Mail Fax

Voting residence address

Usually your last U.S. residence or your legal U.S. residence. See instructions.

7 Street Address (not P.O. Box) Apt. #

City/Town/Village

County State Zip Code

Where to send my ballot

This is your current mailing address and should be different from above. If required, place a forwarding address in Box 9.

8

Additional requirements for your State

Such as: mail forwarding address, additional email address/phone number, or other State required information. See Voting Assistance Guide.

9

Affirmation (REQUIRED): 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.

Signature

Today's date

You must sign and send in.

/ /

M M D D Y Y Y Y

Witness signature / date if required by your State.

Signature

Date