SOUTH CAROLINA VOTER REGISTRATION

MAIL APPLICATION

| SOUTH | CAROLINA |
|----------|------------|
| ELECTION | COMMISSION |

| Registration Number | |
|---------------------|--|
| | |

| | | | | | | Check | COne: | | | | | | | | |
|---|--|--|---|--|---|---|--------------------------------------|---|---|-----------------------------|---|----------------------------|--|--|--|
| Will you be If you check | e 18 years of | age on or be <mark>sponse to e</mark> | tes of America efore election ther of these q | day? Yes | S No | | Check al | | ion oving from o ne change w | • | | | | | |
| NAME | Last | | | | First | MI | | | | | Suffix | | | | |
| SEX | Male | RACE | Black/A White Americ | frican can Asian | Hispanic A | Native Other Hispanic American Specify | | | | | SOCIAL SECURITY NUMBER ** | | | | |
| SEA | Female | KACE | | | | | | | _ | - | | | | | |
| ADDI WHER | | Street | | | | Α | Apt Num | ber | Yes | | ity Limits No □ | | | | |
| LIV (Physical | VE | City | | | | | State | Zip Cod | | l you like to | be a poll we No | orker? | | | |
| MAII ADDI | | Street or Po | ost Office Box | | | | | | • | | | | | | |
| (if diff | ferent | City | | | | | S | tate | Zip Code | | | | | | |
| BIRTH | DATE | Month | Day | 7 | Year | PHONE # Home | | |) | Work | ·) | | | | |
| PREVI REGISTRATI | | Precinct | | С | ounty | State Previou | | | | evious Nam | ie | | | | |
| -I will be 18 -I am a reside -I am not unc -I am not cor -I have never if previousl or parole, c -the address | rm that: on of the Unite years of age of ent of South C der a court ord affined in any p been convict y convicted, or I have recei | d States of An or before Earolina, this ler declaring bublic prison ed of a felom have served wed a pardon my only leg | America Election Day county and pre me mentally in resulting from y or offense aga my entire sent for the convict al place of resid | competent a conviction ainst the election ence, inclusion | on of a crime ection laws O | | aı la | ea in whic | have a street na ch you live. Sh ch as schools, ch ds. | ow your ho | use in relation | n to local | | | |
| | | | ly, swear (or aff on conviction, in | irm) falsely | | oath req | | - | | | | | | | |
| statement be require Merchant | , paycheck or or ed to provide the Marines and the | other governments information their families, | For the first time nent document to when you vot and U.S. Citizer | hat shows ye. Voters vos residing of | your name and who are age 65 outside the U.S. | address and ove S. are exe | in this co r, voters empt fron | ounty. If y with disab n this requi | ou do not provilities, member rement. | ride this idents of the U.S | ntification no S. Uniformed k here if you a | w, you will Services or | | | |
| | | | our Social Secu | rity Number | r is not release | d to any | unauthor | ized indivi | | | | | | | |
| □ A == == | ····1 □ Þ. | 11 | | | er Registrat | | | | | d) Dec | | ES .org | | | |
| ☐ Appro | oved Di | sapproved t | ру | | | | (Me | mber, Vote | r Registration B | oara) Date | | | | | |

$\begin{array}{c} {\rm STATE\ OF\ SOUTH\ CAROLINA} \\ {\bf Application\ for\ Voter\ Registration} \end{array}$

| Registration Number | |
|---------------------|--|
| - | |

| Social Secur | | | | | | | | | | | | y Numbe | er does not |
|--|---|---|---|--|--|--|---|--|--|--|--|------------------------------|------------------------------------|
| NAME | Last | | • | | | First | | | | | MI | Sı | ıffix |
| SEX | Male Female | RAC | E Whit | te Ame | 'African rican Asian | Hispanio | Other Specify | | | SOCI | IAL SECU | JRITY N | UMBER |
| ADDR WHERE LIV | YOU | Street | · | | | | | | apt Number tate | Zip Coo | Yes 🗌 | City Limi No | |
| MAIL! ADDR | ING ESS | Street or F | ost Office | e Box | | 000 | | S | tate | Zip Cod | e | | |
| | , | Month | Day | Year | PHONE | # Home | 400 | 5011 | 00 | Work | | | |
| | | Precinct | | | County | | 57 | S | tate | | | | |
| I have entire I do solemnlattained the affirm) that the description in the second sec | e never bee sentence, i y swear (c age of eigh he present | n convict including or affirm) ateen year address I | ed of a f probatic that I a rs and ar listed ho owingly, enalties | Telony of on or part of the market aresin is | or offense agarole, or I have a size of the ident of the my sole leg | gainst the ave recei United State of gal place | e election ved a parc States and South Ca of resider taking an | laws OR lon for the late on arolina, the and the late and the late of the late | if previouse conviction the date on the date of the da | sly conviction. of the next and of monother properties of the next and of monother properties of the next and the next an | t ensuing y precinct place as m Applicant be guilty o | election, I furth y legal re | I will have er swear (or esidence. |
| Sworn to and | l subscribe | d before 1 | me this_ | | | da | y of | | | | , 2 | 0 | |
| | LIVE MAILING ADDRESS (if different from above) BIRTHDATE Street or Post Office Box State Zip Code State Zip Code Work | | | | | | | | | | | | |
| | | | | | For Reg | istration | Board U | se Only | | | | | |
| City M | fail City Ma | il Co. To | wnship | Precinct | House | Senate | Co. Council | School | City Cncl. | Cong. | Watershed | | |
| | The State El the House Le | ection Com | ımission p Oversight (| rovided to | these docume ee on May 24, | ents to 2017. | | | | | | | |

Agency Code

| SIAIEOF | SOUTH CAROLINA | |
|--------------------|------------------------|---|
| Application | for Voter Registration | Г |

| Registration Number |
|---------------------|
| |

Social Security Number is required by the S.C. Code of Laws and is used for internal purposes only. Social Security Number does not appear on any report produced by the State Election Commission nor is it released to any unauthorized individual

| CHE | CK ONE | | □ N | ew regis | tration in o | county | Change in current registration | | | | | | | | |
|---|---------------------------------------|-----------|------------|------------|--------------|-------------------------------|--------------------------------|----------------|---------|--------------------|---------|-----------|--------------------|--------|--|
| NAME | Last | | | | | | First | | | | | MI | Suffix | < | |
| SEX | Male Female | l R | RACE | Wh | iite | lack/African American | Asiar | | panic | Other (Specify) | SO | CIAL SE | CURITY | NO. | |
| WHE | DRESS RE YOU LIVE | | reet ty | | | | | | | Apt Number State | Zip Cod | Yes | CITY LIMITS | No [| |
| ADI (if di | AILING DRESS ifferent above) | Cit | | ost Offic | е Вох | | | | | State | Zip Cod | le | Apt N | Number | |
| BIRT | HDATE | М | onth | Day | Year | PHON | JE Ho | me | | | Work | | | | |
| | VIOUS TRATIO | | ecinct | | | | Со | unty | 7 | | | | State | • | |
| - I am a resident of South Carolina, this county and precinct I am not under a court order declaring me mentally incompetent I am not confined in any public prison resulting from a conviction of a crime I have never been convicted of a felony or offense against the election laws OR if previously convicted, I have served my entire sentence, including probation or parole, or I have received a pardon for the convictionThe address listed above is my only legal place of residence and I claim no other place as my legal residence. | | | | | | | | | | | | | | | |
| | | | | | | lsely in taking | g any oath | | law | | | | | | |
| f you declir egistration | | er to vot | e, that d | lecision v | will remain | confidential | and be us | sed only for v | voter | | | | | | |
| | | | | | | which the ap tration purpo | | was submitte | ed will | | | | | | |
| | | | | | F | or Regis | tration | n Board | Use C | Only | | | | | |
| City | Mail City | Mail C | o. Tov | vnship | Precinct | House | Senate | Co. Council | School | City Council | Cong. | Watershed | Reg Loc 920 | Misc | |
| Rejec | ted | - | - | • | | - | | - | | | - | _ | | - | |
| Appro | oved By | | | Membe | er, Board c | of Voter Regi | stration | | | _ | Date | | | | |

