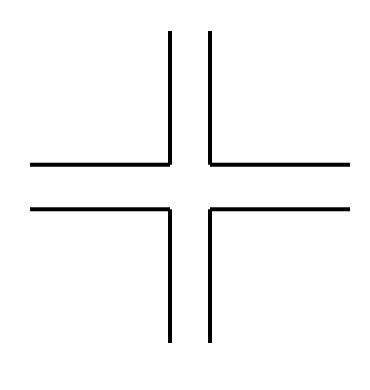
| | H CAROI APPLICA | | JIST | RATION SOUTH CAROLINA ELECTION COMMISSION | | | | | | | |
|--|------------------------|---------------------|------------------|--|--|--|--|--|--|--|--|
| | | Registration | Num | ber | | | | | | | |
| Are yo | u a citize | n of the United Sta | ates | of America? Yes 🗌 No 🗌 | | | | | | | |
| Will you be 18 years of age on or before Election Day?Yes 🗌 No 🗌 | | | | | | | | | | | |
| If you checked 'NO' in response to either of these questions, DO | | | | | | | | | | | |
| NOT с | omplete t | his form. | | | | | | | | | |
| Check | One: Ne | ew Registration | | | | | | | | | |
| | Cł | nange in Registrat | ion I | nformation | | | | | | | |
| Last Name: | | | | First Name: | | | | | | | |
| Middle Initial: Suffix: | | | Sex: Female Male | | | | | | | | |
| Race: | White | | | Social Security Number*: | | | | | | | |
| | Black/African American | | | | | | | | | | |
| | Asian | | | Birthdate: MM/DD/YYYY | | | | | | | |
| | Hispanio | ; | | | | | | | | | |
| | Native American | | | Home Phone Number: | | | | | | | |
| | Other, P | lease Specify | | Work Phone Number: | | | | | | | |
| | | | | | | | | | | | |
| ADDRE | SS WHEI | RE YOU LIVE: | | | | | | | | | |
| Street: _ | | | | | | | | | | | |
| Apt Num | nber: | City | / : | | | | | | | | |
| State: | | | | e: | | | | | | | |

| Inside City Limits | Would | Would you like to be a Poll Worker | | | | | |
|---|-------|------------------------------------|--|--|--|--|--|
| Yes No | Yes | No 🗌 | | | | | |
| | | | | | | | |
| Mailing Address, if different from above: | | | | | | | |
| Street or Post Office Box: | | | | | | | |
| Apt Number: | City: | /: | | | | | |
| State: | | Code: | | | | | |
| Previous Registration: | | | | | | | |
| Precinct: | | County: | | | | | |
| State: | | | | | | | |

Draw a diagram of the area in which you live. Show your house in relation to local landmarks such as schools, churches, stores, etc. Be sure to label the streets or roads.

ATTACH ID IN SPACE BELOW



VOTER DECLARATION - READ AND SIGN BELOW I SWEAR OR AFFIRM THAT:

- \checkmark I am a citizen of the United States of America.
- \checkmark I will be 18 years of age on or before election day.
- ✓ I am a resident of South Carolina, the county and precinct.
- ✓ I am not under a court 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 conviction.
- The address listed above is my only legal place of residence, and I claim no other places as my legal residence.

Signature

Date of Application

Whoever shall, willfully and knowingly, swear (or affirm) falsely in taking any oath required by law shall be guilty of perjury and, on conviction, incur the pains and penalties of the offense.

ID Required: If you are registering for the first time in this county, you must attach a copy of a current valid photo ID <u>or</u> a copy of a current utility bill, bank statement, paycheck or other government document that shows your name and address in this county. If you do not provide this identification now, you will be required to provide this information when you vote. Voters who are age 65 and over, voters with disabilities, members of the U.S. Uniformed Services or Merchant Marines and their families, and U.S. Citizens residing outside the U.S. are exempt from this requirement.

*Social Security Number (SSN) is required by the S.C. Code § 7-5-170. Applications containing only the last four digits of your SSN will be accepted. Your SSN is used for internal purposes only and eliminates multiple registrations by a single individual. Your SSN is not released to any unauthorized individual.

For Voter Registration Board Use Only

| City | Mail City | Mail Co. | Township | Precinct | House |
|--------|-----------|----------|-----------|----------|-----------|
| | | | | | |
| Senate | Co. Cncl | School | City Cncl | Cong. | Watershed |
| | | | | | |

Approved

Disapproved by _____

Date _____

Member, Voter Registration Board

