

Important Voter Registration Reminders

FILL IN your information. ([See instructions](#))

PRINT by clicking the blue print button on the last page to print your registration form.

SIGN the form (and, if you asked to be a permanent mail ballot voter, verify you INITIALED your request)

MAIL the form in an envelope to:

**Registrar of Voters
PO Box 85093
San Diego, CA 92186-9910**

The form must be postmarked at least 15 days before an election to be valid for that election

CALL (858) 565-5800 if you have questions

- To report fraud, call the Secretary of State's hotline, 1-800-345-VOTE or email elections@sos.ca.gov
- Voters who face life-threatening situations may qualify for confidential voter status. For more information, please contact the Secretary of State's Safe At Home program or visit the Secretary of State's Web site at www.sos.ca.gov.
- The law protects your voter registration information against commercial use. Report any problems to the Secretary of State's Voter Hotline 1 (800) 345-8683.

VOTER REGISTRATION FORM / FORMULARIO DE CALIFICACION PARA REGISTRARSE COMO VOTANTE

SAN DIEGO COUNTY

Fill out this form if you are a new voter, have moved or changed your name, or want to change your political party preference. You must be a U.S. citizen and at least 18 years old by the next election to use this form. Use blue or black ink. Print clearly. — *Llene este formulario si: es nuevo votante, se mudó o cambió de nombre o si desea cambiar su preferencia de partido político.*
 Para usar este formulario, tiene que ser ciudadano de EE UU y tener al menos 18 años de edad en la próxima elección. Use tinta azul o negra. Escriba en letra de molde y de manera clara.

Your legal name: First name — *Nombre legal:* Primer nombre _____ Middle name — *Segundo nombre* _____

① Last name — *Apellido* _____

Optional — *Opcional*
 Mr. — *Sr.* Mrs. — *Sra.*
 Ms. — *Sra.* Miss — *Srta.*

② Home address — *not a P.O. Box or business address* — (Number, Street, Ave., Drive, etc. Include N, S, E, W)
Domicilio — no apartado postal ni dirección de trabajo — (Número, calle, avenida, camino, etc. Incluir N, S, E, O)

Apt or unit #
Nº de Departamento o unidad

④ City — *Ciudad* _____ State — *Estado* **C A** Zip — *Código postal* _____ California county — *Condado de California* _____

⑤ If you do not have a street address, describe where you live (*Cross streets, Route, N, S, E, W*)
Si no tiene dirección con calle, describa dónde vive (entre qué calles, ruta, N, S, E, O)

⑥ Mailing address — *if different from above, or P.O. Box* — *Domicilio postal* — *si es distinto del que figura arriba o apartado postal*

⑦ City — *Ciudad* _____ State — *Estado* Zip — *Código postal* _____ Foreign country — *País extranjero* _____

⑧ Date of birth — *Fecha de nacimiento* _____ U.S. state or foreign country of birth — *Estado de EE UU o país extranjero en que nació*

⑨ MM DD 1 9 YY ⑩

⑪ CA driver's license or CA ID card # — *Nº de licencia de manejar de California o tarjeta de identificación de California* _____ SSN (Last 4 numbers) / *SSN (las últimas 4 cifras)* _____

If you do not have a CA driver's license or ID card, list the last 4 numbers of your Social Security Number, if you have one. — *Si no tiene licencia de manejar de California ni tarjeta de identificación de California, escriba las últimas 4 cifras de su número de Seguro Social (SSN), si tiene uno.*

⑫ Email (optional) — *Dirección de correo electrónico (opcional)* _____ Phone number (optional) — *Número de teléfono (opcional)* _____

⑭ Do you want to choose a political party preference? — *¿Desea indicar su preferencia de partido político?*

No Party Preference. No, I do not want to choose a political party preference. (If you check this box, you may not be able to vote for some parties' candidates at a primary election for U.S. President or party committee.) — *Sin preferencia de partido.* No, no deseo indicar preferencia de partido político. (Si selecciona esta casilla, es posible que no pueda votar por los candidatos de algunos partidos en las elecciones primarias para Presidente de EE UU ni el comité partidista.)

Yes, my political party preference is (check one) — *Sí, mi preferencia de partido político es* (marque uno):

American Independent Party / *Partido Americano Independiente* Democratic Party / *Partido Demócrata* Green Party / *Partido Verde* Libertarian Party / *Partido Libertario*

Peace and Freedom Party / *Partido Paz y Libertad* Republican Party / *Partido Republicano* Other (specify): _____

Phone numbers are posted at polling places on election day — *Los números de teléfono se publican en las mesas electorales el día de la elección.*

⑮ To receive a vote-by-mail ballot in all elections, initial here: _____ — *Para recibir una balota de votación por correo en todas las elecciones, ponga sus iniciales aquí:* _____

⑯ If you were registered to vote before, fill out below: — *Si se inscribió para votar antes, llene a continuación:*

First name — *Primer nombre* _____ Middle initial / *Inicial del segundo nombre* _____ Last name — *Apellido* _____

Previous address where you were registered — *Dirección en la que estaba inscrito anteriormente* _____ City — *Ciudad* _____

State / *Estado* _____ Zip / *Código postal* _____ Previous county / *Condado anterior* _____ Previous political party preference (if any) / *Preferencia de partido político anterior (si corresponde)* _____

⑰ Are you a U.S. citizen? / *¿Es usted ciudadano de EE UU?* Yes-Sí No

Will you be 18 or older by the next election? / *¿Tendrá 18 años de edad o más en la próxima elección?* Yes-Sí No

A "No" answer to either question means you CANNOT register to vote.
Si responde "No" a cualquiera de estas preguntas, NO PUEDE inscribirse para votar.

⑱ Read and sign below. — *Lea y firme a continuación.*

I am a U.S. citizen and will be at least 18 years old on election day. I am not in prison or on parole for a felony. I understand that it is a crime to intentionally provide incorrect information on this form. I declare under penalty of perjury under the laws of the State of California that the information on this form is true and correct. — *Soy ciudadano de EE UU y tendré al menos 18 años de edad el día de la elección. No estoy en prisión ni en libertad condicional por haber cometido un delito grave. Entiendo que brindar información incorrecta de manera intencional en este formulario es un delito. Declaro bajo pena de perjurio según las leyes del Estado de California que la información de este formulario es verdadera y correcta.*

Optional — *Opcional*

A. Check here if you can be a poll worker. / *Marque aquí si puede trabajar como trabajador electoral.*
(If bilingual, indicate language: _____)
(Si es bilingüe indique el idioma: _____)

Check here if you can provide a polling place on election day. / *Marque aquí si puede brindar una mesa electoral el día de la elección.*

B. Your ethnicity/race: / *Su etnia/raza:* _____

C. Check your language preference: / *Marque su preferencia de idioma:* English / *Inglés* Spanish / *Español*
 Vietnamese / *Vietnamita* Tagalog / *Tagalog*
 Việt ngữ Tagalog

Did someone help you fill out or deliver this form? — *¿Alguien lo ayudó a llenar o a entregar este formulario?*

If yes, the person who helped you must fill out and sign both parts of this green box — *Si "sí", la persona que lo ayudó debe llenar y firmar ambas partes de esta casilla verde.*

Voter Signature — *Firma del Votante* _____ Month—Mes _____ Day—Día _____ Year—Año _____

140002

Important! To vote in the next election, you must mail or deliver this card at least 15 days before the next election. New voters who register by mail may have to show their ID at the polling place the first time they vote. *¡Importante!* Para votar en la próxima elección, debe enviar por correo o entregar esta tarjeta al menos 15 días antes de la próxima elección. Los votantes nuevos que se inscriban por correo quizá tengan que presentar su tarjeta de identificación en la mesa electoral cuando votan por primera vez.

Signature — *Firma* _____ Month—Mes Day—Día Year—Año _____

Name, address and tel.: — *Nombre, dirección y número de teléfono:* _____

Org. name and tel. (if any): — *Nombre y número de teléfono de la organización (si corresponde):* _____

Create Printable Form

Instructions:

PRINT FIRST NAME, MIDDLE NAME or INITIAL, and LAST NAME.

You may use an initial for first name or middle name if you normally signs in that manner. Example: E. Marion Smith or Elaine M. Smith.

If no middle name, leave blank. Example: Jane (NMI) Voter.

A married woman must use her own first name. Example: Jane Q. Voter, not Mrs. John Voter.

You may use a hyphenated last name. Example: Richards-Smith.

You may use Jr., Sr., I, II, III, IV, etc. after last name. Example: John Q. Voter, Jr.

Do not use titles such as Dr., Rev., Lt., Capt., etc. Example: Jane Q. Voter, not Dr. Jane Q. Voter.

Fill in the **YOUR COMPLETE RESIDENCE ADDRESS** including city and zip code. Please include North, South, East, West, if appropriate, and whether it is a street, avenue, road, lane, drive, way, circle, etc. A Post Office Box or Business Address is **NOT ACCEPTABLE** as a **residence** address.

IF YOU DO NOT HAVE A COMPLETE STREET ADDRESS, describe the location by filling in the name of the property owner and a legal description such as section, township and range, or the assessor's parcel number. If you:

1. Reside on a boat, you should use the name and address of the marina or anchorage including the slip or berth number in line (4). Enter mailing address in line (7).
2. Are in the military and living on a ship or at a duty station, you should provide name of the ship or duty station in line (4). Enter mailing address in line (7).
3. Are homeless, you must provide exact description of where you live. Include cross streets, bridges or other landmarks in line 4. Example: SW corner of 5th & F St. Enter mailing address (required) where you receives mail in line (7).

ENTER MAILING ADDRESS if it is different from line (4) such as a post office box, business address, etc. If you use a private mailbox company – include PMB number.

ENTER DATE OF BIRTH (MANDATORY). Enter Month, Day, Year (08/22/36). If you are 17 years old, you may register to vote if you will be 18 years old on or before the date of the next election.

ENTER PLACE OF BIRTH. Name of **State in the United States**, if born in the USA, or the name of the **Country**, if born outside the USA.

ENTER CALIFORNIA DRIVER'S LICENSE OR ID NUMBER Federal law requires the registrant to provide their California driver's license or California ID number. If you do not have one then you must provide the last 4 numbers of your **SOCIAL SECURITY NUMBER**. If you do not have a driver's license or social security number, the state will assign you a unique number. You may be required to show identification when you vote.

ENTER TELEPHONE NUMBER AND EMAIL ADDRESS. This information is optional but very helpful when processing your registration. If you have an unlisted phone number, the phone number should not be entered. Voter files are now confidential, however, voter information is available for scholastic, journalistic, or government purposes.

ENTER A POLITICAL PARTY. If you wish no party affiliation, mark the "NO" at ⑭. If "other" is marked, fill in the name of party desired. If left blank, it will be assumed the voter has "declined to state".

The six qualified political parties in California are [American Independent](#), [Democratic](#), [Green](#), [Libertarian](#), [Peace & Freedom](#), and [Republican](#).

PERMANENT ABSENTEE VOTER If you wish to become a permanent absentee voter please initial where indicated.

PRIOR REGISTRATION must be completed. If you are currently a registered voter in our county, a different county, or another state, please fill out the prior registration portion. If you are registered with a different name, please give us that information.

Mark a language preference at C in the (Optional) box, to receive voting material in (Spanish, Filipino or Vietnamese).

ANY PERSON WHO HELPS FILL OUT OR ASSISTS you in delivering this form must enter their

Name
Phone number
Address, and their
Signature.

2. The **Date**, and
3. The **Name** and **Phone Number** of the person, company, or organization.

YOU MUST BE A UNITED STATES CITIZEN!

Mark the appropriate box (see line ⑰). If "NO," it is a felony offense to register to vote.

YOU MUST BE 18 YEARS OF AGE AT NEXT ELECTION!

A person entitled to vote must be a United States Citizen, a resident of California, not in prison or on parole for the conviction of a felony, and at least 18 years of age at the time of the election.

WARNING: It is illegal to register to vote if you are not eligible or to fraudulently register other persons. Punishable by up to three years in prison.
