

Signature Update Form

Use Black Pen - Please Print Clearly NAME CHANGE ADDRESS CHANGE IN WASHINGTON NEW REGISTRATION IN WASHINGTON

NOTE: Do not complete this form if you are not a U.S. Citizen		FOR OFFICE USE ONLY	
Will you be at least 18 years of age or older before election day? <input type="radio"/> YES <input type="radio"/> NO			
Are you a Citizen of the United States? <input type="radio"/> YES <input type="radio"/> NO			
Federal & State Law require you to provide your WA Driver's or WA ID Card. If you do not have a WA Driver's License or ID Card, provide the last 4 digits of your Social Security Number.			
1 A. WA Driver's License	B. Last 4 Digits/SSN	<input type="radio"/> Check here if you do not have a WA Drivers License, ID card, or SSN.	3 Date of Birth (Month/Day/Year)
2 Last Name		<input type="radio"/> Male <input type="radio"/> Female	Daytime Phone Number ()
4 First Name	M.I. <input type="radio"/> Jr. <input type="radio"/> II <input type="radio"/> Sr. <input type="radio"/> III	E-Mail Address (optional)	
5 Washington Resident Address (Required)		City or Town	ZIP Code
6 Mailing Address Where You Get Your Mail (if different from above)		City or Town	State ZIP Code
7 Check any that apply <input type="radio"/> Military Domestic <input type="radio"/> Military Foreign <input type="radio"/> National Guard/Reserves <input type="radio"/> U.S. Citizen Overseas		8 ONGOING ABSENTEE REQUEST I would like to receive absentee ballots for all future elections <input type="radio"/> YES <input type="radio"/> NO	
9 I was previously registered under this name and address			
NAME _____		Sign as previously registered	
STREET _____ COUNTY _____		X	
CITY _____ STATE _____ ZIP _____			

FOLD HERE SECOND

WARNING: If you knowingly provide false information on this voter registration form or knowingly make a false declaration about your qualifications for voter registration, you will have committed a class C felony that is punishable by imprisonment for up to five years, or by a fine of up to ten thousand dollars or both imprisonment and fine. (RCW 29A.08.210)

10 Voter Declaration

By signing this document, I hereby assert, under penalty of perjury, that I am legally eligible to vote. If I am found to have voted illegally, I may be prosecuted and/or fined for this illegal act. In addition, I hereby acknowledge that my name and last known address will be forwarded to the appropriate state and/or federal authorities if I am found to have voted illegally. (RCW 29A.08.210)

- I declare that the facts on this registration form are true;
- I am a citizen of the United States;
- I am not presently denied my civil rights as a result of being convicted of a felony;
- I will have lived in Washington state at this address for thirty days immediately before the next election at which I vote;
- I will be at least eighteen years old when I vote.

(RCW 29A.08.230)

SIGN OR MARK IN THE BOX

X

11 If you are physically unable to sign your name, please have the person who assisted you in completing this form provide the following:	NAME _____
	ADDRESS _____

DATE SIGNED _____
Month/Day/Year

Rev 4-6

Complete and mail to: King County Voter Services
King County Administration Building
500 4th Avenue, Room 553
Seattle, WA 98104