		otati	e Voter	10	<b>J</b> 13				
<ul> <li>Begister to vote in elections in New York State. You can also use this form to:</li> <li>change the name or address on your voter registration</li> <li>become a member of a political party</li> <li>change your party membership</li> <li>pre-register to vote if you are 16 or 17 years of age</li> <li>be a US citizen;</li> <li>be 18 years old (you may pre-register at 16 or 17 but cannot vote until you are 18);</li> <li>not be in prison for a felony conviction;</li> <li>not claim the right to vote elsewhere;</li> <li>not found to be incompetent by a court.</li> </ul>		s in New Fill egistration Bo age Co voi Ca list 1-8 Fir	Send or deliver this form Fill out the form below and send it to your county's address on the back of this form, or take this form to the office of your County Board of Elections. This form must be received no later than 10 days before the election you want to vote in. Your county will notify you that you are registered to vote. <b>Ouestions?</b> Call your County Board of Elections listed on the back of this form or 1-800-FOR-VOTE (TDD/TTY Dial 711) Find answers or tools on our website www.elections.ny.gov			\ F F C C C C C C C C C C C C C C C C C	Verifying your identity We'll try to check your identity before Election Day, through the DMV number (driver's license number or non-driver ID number), or the last four digits of your social security number, which you'll fill in below. If you do not have a DMV or social security number, you may use a valid photo ID, a current utility bill, bank statement, paycheck, government check or some other government document that shows your name and address. You may include a copy of one of those types of ID with this form— be sure to tape the sides of the form closed. If we are unable to verify your identity before Election Day, you will be asked for ID when you vote for the first time.		
Información en español: si le interesa ob formulario en español, llame al 1-800-36		te 中文資料:若约 請電: 1-800-3	您有興趣索取中文資料表格, 67-8683			닉을 원하시 . 전화 하십		দे আগনি এই ফর্মটি বাংলাভে গেভে চান ভাহা 800-367-8683 নম্বরে ফোন করুন	я
It is a crime to procure a fal	se reg	istration or to f	urnish false informatio	on to the l	Board	of Elect	ions.	Please print in blue	or black ink.
Qualifications		If you answer A) Will you be 18 B) Are you at lea age on or before	a citizen of the U.S.?       Yes       No         wer No, you cannot register to vote.       No         be 18 years of age or older on or before election day?       Yes       No         at least 16 years of age and understand that you must be 18 years of afore election day to vote, and that until you will be eighteen years of me of such election your registration will be marked "pending" and your       No			Yes No 8 years of en years of	-		
			vill be unable to cast a ballot in any election?						
		lf you answer	No to both of the price	or questio	ns, yoi	u canno	t register to	vote.	
Your name	3	Last name First name						Suffix Middle Initial	
	4			YYY		E C	andar		
More information		Birth date   5     Phone   -     -   -     7     Email							
The address where you live	8	Address (not P.O. box)       Apt. Number       City/Town/Village       New York State County							
The address where you receive mail Skip if same as above	9	Address or P.O. box       P.O. Box       Zip code       City/Town/Village							
Voting history	10	Have you voted before? Yes No 11 What year?							
Voting information that has changed Skip if this has not changed or you have not voted before	12	Your name was Your address was Your previous state or New York State County was							
Identification You must make 1 selection For questions, please refer to <i>Verifying your identity</i> above.	13	<ul> <li>New York State DMV number</li> <li>Last four digits of your Social Security number</li> <li>I do not have a New York State driver's license or a Social Security number.</li> </ul>							
Political party You must make 1 selection Political party enrollment is optional but that, in order to vote in a primary election of a political party, a voter must enroll in that political party, unless state party rules allow otherwise.	14	Democi Republi Conserv Working Other I do not wan	oll in a political party ratic party can party vative party g Families party t to enroll in any politi be an independent vot		16		<ul> <li>I am a citize</li> <li>I will have I for at least</li> <li>I meet all re to vote in N</li> <li>This is my s</li> <li>The above if it is not tr</li> </ul>	t: I swear or af en of the United States ived in the county, city 30 days before the ele equirements to registe Jew York State. signature or mark in th information is true, I un ue, I can be convicted and/or jailed for up to for	a. or village ction. r e box below. nderstand that and fined up

I need to apply for an Absentee ballot.

I would like to be an Election Day worker.

Date

**Optional questions** 

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Rev. 05/05/2021

## Address and stamp this section

### Your address





#### Your County Board of Elections address (select from below)

### Before mailing, remove tape, fold and seal

New York City 32 Broadway, 7th Fl. New York, NY 10004 (212) 487-5300

Albany 260 S. Pearl St. Albany, NY 12202 (518) 487-5060

Allegany 8 Willets Ave. Belmont, NY 14813 (585) 268-9294

Broome overnment Plaza 60 Hawley St. PO Box 1766 Binghamton, NY

13902 (607) 778-2172

Cattaraugus 207 Rock City St. Suite 100 Suite 100 Little Valley, NY 14755 (716) 938-2400

Cayuga 157 Genesee St. (Basement) Auburn, NY 13021 (315) 253-1285

Chautauqua 7 North Erie St. Mayville, NY 14757 (716) 753-4580

**Chemung** 378 South Main St. PO Box 588 Elmira, NY 14902 (607) 737-5475

Chenango 5 Court St. Norwich, NY 13815 (607) 337-1760

Delaware

97 Main St. Suite 5 Delhi, NY 13753 (607) 832-5321

(845) 486-2473

Erie

Franklin 355 West Main St. Ste. 161 Malone, NY 12953 (518) 481-1663 Clinton Cnty Government Ctr. Ste. 104 137 Margaret St. Plattsburgh, NY 12901 (518) 565-4740 Fulton 2714 St. Hwy 29 Ste. 1 Johnstown, NY 12095 (518) 736-5526

**Genesee** County Building #1 15 Main St. Batavia, NY 14020 (585) 815-7804 Columbia 401 State St. Hudson, NY 12534 (518) 828-3115 Cortland 112 River St. Suite 1

Greene 411 Main St. Ste. 437 Catskill, NY 12414 (518) 719-3550 Cortland, NY 13045 (607) 753-5032

> Hamilton Rte. 8 PO Box 175 Lake Pleasant, NY 12108 (518) 548-4684

Dutchess 112 Delafield Street, Suite 200 Poughkeepsie, NY 12601 Herkimer 109 Mary St. Ste. 1306 Herkimer, NY 13350 (315) 867-1102

134 W. Eagle St. Buffalo, NY 14202 (716) 858-8891 **Jefferson** 175 Arsenal St. Watertown, N NY 13601 (315) 785-3027

Essex 7551 Court St. PO Box 217 Elizabethtown, NY 12932 (518) 873-3474

Lewis 7660 N. State St. Lowville, NY 13367 (315) 376-5329

Livingston Livingston County Govt. Ctr. 6 Court St. Room 104 Geneseo, NY 14454 (585) 243-7090

Madison County Office Bldg. N. Court St. PO Box 666 Wampsville, NY 13163

(315) 366-2231 Monroe 39 Main St. W. Rochester, NY 14614 (585) 753-1550

Montgomery Old Courthouse 9 Park St. PO Box 1500 Fonda, NY 1206 (518) 853-8180 068

Nassau 240 Old Country Rd. 5th Fl. PO Box 9002 Mineola, NY 11501 (516) 571-8683

Niagara 111 Main St. Ste. 100 Lockport, NY 14094 (716) 438-4040

**Oneida** Union Station 321 Main St. 3rd Fl. Utica, NY 13501 (**315**) **798-5765** 

Rensselaer Ned Pattison Government Ctr. 1600 Seventh Ave. Troy, NY 12180 (518) 270-2990 Onondaga 1000 Erie Blvd West Syracuse, NY 13204 (315) 435-3312

Rockland

**Ontario** 74 Ontario St. Canandaigua, NY 14424 (585) 396-4005

Orange 75 Webster Ave PO Box 30 Goshen, NY 10924 (845) 360-6500

Orleans 14016 Route 31 West, Ste. 140 Albion, NY 14411 (585) 589-3274

Oswego 185 E. Seneca St.

Otsego

(607) 547-4247

Box 9 Box 9 Oswego, NY 13126 (315) 349-8350

Ste. 2 140 County Hwy. 33W Cooperstown, NY

Putnam 25 Old Route 6 Carmel, NY 10512 (845) 808-1300 Rensselaer

(607) 535-8195 Seneca One DiPronio Dr. Waterloo, NY 13165 (315) 539-1760

Schuyler County Office Bldg. 105 9th St., Unit 13 Watkins Glen, NY 14891

**Steuben** 3 E. Pulteney Sq. Bath, NY 14810 (607) 664-2260

11 New Hempstead Rd. New City, NY 10956 (845) 638-5172 St. Lawrence 80 State Hwy 310 Suffolk Yaphank Ave. PO Box 700 Yaphank, NY 11980 (631) 852-4500

Canton, NY 13617 (315) 379-2202 **Saratoga** 50 W. High St. Ballston Spa, NY Sullivan Gov't. Ctr. 100 North St. PO Box 5012 Monticello, NY 12701 (845) 807-0400

12020 (518) 885-2249 Schenectady 2696 Hamburg St. Schenectady, NY 12303

(518) 377-2469

PO Box 306 Owego, NY 13827 (607) 687-8261 Schoharie County Office Bldg. 284 Main St. PO Box 99 Schoharie, NY 12157 (518) 295-8388

Tompkins Court House Annex 128 E. Buffalo St. Ithaca, NY 14850 (607) 274-5522

Tioga 1062 State Rte. 38 PO Box 306

Ulster 79 Hurley Ave. Kingston, NY 12401 (845) 334-5470

Warren Warren Cnty. Municipal Ctr. 3rd Floor Human Serv. Bldg 1340 St. Rte. 9 Lake George, NY 12845 12845 (518) 761-6456

Washington 383 Broadway Fort Edward, NY 12828 (518) 746-2180

Wayne 7376 State Rte. 31 PO Box 636 Lyons, NY 14489 (315) 946-7400

Westchester 25 Quarropas St. White Plains, NY 10601 (914) 995-5700

Wyoming 4 Perry Ave. Warsaw, NY 14569 (585) 786-8931

Yates Ste. 1124 417 Liberty St. Penn Yan, NY 14527 (315) 536-5135

# (Optional) Register to donate your organs and tissues

If you would like to be an organ and tissue donor upon your death, you may enroll in the NYS *Donate Life*<sup>TM</sup> Registry online at www.donatelife.ny.gov or complete the form below.

You will receive a confirmation email or letter, which will also provide you an opportunity to limit your donation.

	DONATE	»
	<b>I I I F F</b>	
2	lew York State	e

By signing	j belo	w,	
you certify	/ that	you	are:

- 16 years of age or older;
- consenting to donate all of your organs and tissues for transplantation, research, or both;
- authorizing the Board of Elections to provide your name and identifying information to NYS Donate Life™ Registry for enrollment;
- and authorizing the Registry to give access to this information to federally regulated organ procurement organizations and NYS-licensed tissue and eye banks and others approved by the NYS Commissioner of Health upon your death.

Last name			
First name	•		
Middle Initial Suffix	•		
Address	•		
Apt. Number	Zip code		
City			
Birth date	Gender 🗌 M 🛛 🗍 F		
Eye color	Height Ft. In.		
Email	DMV or ID NYC #		

Date