	Voter Registration Application (Sections in red are required.)
Eligibility You must be a U.S. citizen and old enough to register to submit this form. Required.	Are you a citizen of the United States of America? If you checked "no" in response to this question, do not submit this form. You are not qualified to vote. Yes No No
	If you answered "no" to the question above, are you at least 16 years of age and understand that you when the second of the properties will be 18 years of age on or before election day to vote? If you checked "no" in response to both of these age questions, do not submit this form. You are not qualified to register or preregister to vote.
rint your name equired,	2 Last Name Brown Suffix (Jr., Sr., II, III, IV) First Name DC W10.5 Middle Name DC W10
dentification nformation equired.	NC Driver's License/DMV ID number OR, if you do not have one Last 4 digits of your Social Security number OR I do not have a driver's license/DMV ID or Social Security number.
Residential address our home address. equired.	Address (not P.O. Box) 319 Santell LW Apt/Unit # City Charlotte NC Zip 23214 County MCC/K If you have lived at this address less than 30 days, when did you move here? (mm/dd/yyyy)
Mailing address you do not receive mall at your sidential address, you must rovide a mailing address. Required.	Same as above Address or P.O. Box City State Zip
Io physical address? you do not have an ddress, show on the map here you live or normally eep.	Write the names of the nearest crossroads (or streets). Draw an X on the map to show where you live/sleep. Remember to provide a valid mailing address in Section 5 so that the board of elections can send you a voter card.
Aboutyou	Gender Ethnicity Race Asian Native Hawaiian/ Male Hispanic/Latino African American/Black White Pacific Islander Female Not Hispanic/Latino American Indian/Alaska Native Multiracial Other
olitical party affiliation	Constitution Party
Old registration f you are currently registered to ote somewhere else, complete his section so that your prior egistration can be cancelled.	Name and address on last registration to cancel Last Name SuffitOCT 0.7 2024 9 First Name Middle Name Street City State Zip County
Contact information his optional information is elpful if we have questions.	10 Phone (920) 900 - 8143 Email
Signature Fraudulently or falsely completing this form is a Class I felony under Chapter 163 of the NC General Statutes.	I have reviewed the contents of this form and attest that: I am a U.S. citizen; I am at least 18 years old, or will be by the date of the general election; or I am at least 16 years old and understand that I must be at least 18 years old on the day of the general election to vote; I will have lived at the residence identified on this form for 30 days before the date of the election in which I intend to vote; If filled out Section 9 above, I am requesting that my old registration be cancelled; and I am not currently serving a felony sentence (including any probation, post-release supervision, or parole). Voter, sign and date here (Required)
	Date (mm/dd/yyyy) X Q/25/2024 ID DATE (mm/dd/yyyy) U DATE ADHESTVE REMOVE LINER SERIT BADWED BASS

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