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.] No
	1	Will you be 18 years of age on or before election day?] No
		must be 18 years of age on or before election day to vote?	No
		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.	
Print your name Required,	2	Last Name Suffix (Jr, Sr., II, III, IV) First Name Middle Name	
Identification		NC Disease (DMVID asserted	
information		NC Driver's License/DMV ID number OR, if you do not have one	
Required,	3	Date of birth Last 4 digits of your Social Security number _	
		(mm/dd/yyyy) OR ☐ 1 do not have a driver's license/DMV ID or Social Security	y num
Residential address		Address (not P.O. Box) 1319 Santell LN Apt/Unit	
Your home address. Required,	4	City Chanatte NC Zip 28214 County MCCK	
		If you have lived at this address less than 30 days, when did you move here? (mm/dd/yyyy)	
Mailing address If you do not receive mail at your residential address, you must provide a mailing address. Required.		Same as above	
	5	Address or P.O. Box Apt/Unit #	
		City State Zip	
No physical address?		Write the names of the nearest crossroads (or streets).	
If you do not have an		Draw an X on the map to show where you live/sleep.	
address, show on the map where you live or normally	6	Remember to provide a valid mailing address in Section	
sleep	··I	5 so that the board of elections can send you a voter card.	: -ţ-
About you	_	Gender Ethnicity Race	
	· 7 ·	White teams	slande
	-	☐ Fernale ☐ Not Hispanic/Latino ☐ American Indian/Alaska Native ☐ Multiracial ☐ Other	
Political party affiliation	4	☐ Constitution Party ☐ No Labels Party ☐ Other	
	ο :	☐ Democratic Party ☐ Republican Party ☐ Other ☐ Other ☐ Other ☐ Inaffiliated (No Party) ☐ If you select a party that is not recognized in North Carolina	
	8 †	☐ Green Party ☐ Unaffiliated (No Party) ☐ Libertarian Party ☐ We The People Party ☐ Unaffiliated (No Party) ☐ Unaffiliate	•
		Name and address on last registration to cancel	_
Old registration			
Old registration If you are currently registered to		Last Name Suffice Control Suffice Control Contr	
If you are currently registered to vote somewhere else, complete	9 ,	First Name Suffice Middle Name	
If you are currently registered to	1	First Name Suffice Middle Name Street Street	
If you are currently registered to vote somewhere else, complete this section so that your prior	1	First Name Suffice Middle Name	
If you are currently registered to vote somewhere else, complete this section so that your prior	1	First Name Suffice Middle Name Street Street	
If you are currently registered to vote somewhere else, complete this section so that your prior registration can be cancelled. Contact information This optional information is	9	First Name	
If you are currently registered to vote somewhere else, complete this section so that your prior registration can be cancelled. Contact information This optional information is helpful if we have questions. Signature Fraudulently or falsely	9	Sufficient Sufficient Sufficient Sufficient Street Street State Zip County State Zip County State	
If you are currently registered to vote somewhere else, complete this section so that your prior registration can be cancelled. Contact information This optional information is helpful if we have questions. Signature Fraudulently or falsely completing this form	9	First Name Middle Name Street OCT 10 2024 City State Zip County Phone GW 201-043 Email I have reviewed the contects 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 year day of the general election to vote;	
If you are currently registered to vote somewhere else, complete this section so that your prior registration can be cancelled. Contact information This optional information is helpful if we have questions. Signature Fraudulently or falsely completing this form is a Class I felony under Chapter 163 of the	9	Email Last Name Suffice Street State Zip County	
If you are currently registered to vote somewhere else, complete this section so that your prior registration can be cancelled. Contact information This optional information is helpful if we have questions. Signature Fraudulently or falsely completing this form is a Class I felony under	9	First Name Middle Name Street OCT 10 2024 City State Zip County Phone GWWW State Zip County 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 year 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 lintend to vote; If I fillied 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).	
If you are currently registered to vote somewhere else, complete this section so that your prior registration can be cancelled. Contact information This optional information is helpful if we have questions. Signature Fraudulently or falsely completing this form is a Class I felony under Chapter 163 of the	9	Email Last Name Suffice Street State Zip County	rs old a

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