

AFFIDAVIT ON APPLICATION FOR VOTER REGISTRATION

STATE OF HAWAII

- County of Hawaii
- County of Kauai
- County of Maui
- City and County of Honolulu

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SS.

IMPORTANT: PRINT CLEARLY IN BLACK INK. FAILURE TO COMPLETE ALL ITEMS WILL PREVENT ACCEPTANCE OF THIS APPLICATION.

AFFIDAVIT NO.

(FOR OFFICE USE ONLY)

I HEREBY SWEAR (OR AFFIRM) THAT THE FOLLOWING INFORMATION IS TRUE AND CORRECT:

1. SOCIAL SECURITY NUMBER* ____ - ____ - ____	2. DATE OF BIRTH ____ / ____ / ____ Month Day Year	3. TELEPHONE Home: _____ Business: _____
4. LAST NAME	FIRST NAME	Middle Initial(s)
5. RESIDENCE ADDRESS IN HAWAII (Must be completed. P.O. Box, R.R., S.R. are not acceptable)	CITY/TOWN	ZIP CODE
6. MAILING ADDRESS IN HAWAII (Street address or P.O. Box)	CITY/TOWN	ZIP CODE
7. If no street/residence address, describe location of residence (Leave blank if box #5 is completed)	CITY/TOWN	ZIP CODE
8. GENDER <input type="checkbox"/> Female <input type="checkbox"/> Male	9. ARE YOU A REGISTERED VOTER IN ANOTHER STATE? If "yes", please complete the following: I was last registered to vote at; _____ in the county of _____ (County) _____ (State) _____ (Zip Code) and hereby authorize cancellation of my previous voter registration.	

Read carefully, mark appropriate "Yes" and "No" box, and sign below.

I hereby swear (or affirm) that:

10. FOR FEDERAL, STATE, and COUNTY ELECTIONS:

- a. I am a citizen of the United States of America (Non-U.S. citizens including U.S. nationals do not qualify). Yes No
- b. I am at least 16 years of age. I understand that I must be 18 years old by election day to vote. Yes No
- c. I am a resident of the State of Hawaii.
The residence stated in this affidavit is not simply because of my presence in the State, but that the residence was acquired with the intent to make Hawaii my legal residence with all the accompanying obligations therein Yes No

Signature

Date _____

11. Witness Signature (required only if applicant makes a mark only)	Date
Address of Witness	Phone No. of Witness

WARNING: ANY PERSON WHO KNOWINGLY FURNISHES FALSE INFORMATION MAY BE GUILTY OF A CLASS C FELONY, PUNISHABLE BY UP TO 5 YEARS IMPRISONMENT AND/OR \$10,000 FINE.

*** Notice:** Section 11-15 of the Hawaii Revised Statutes requires that a person registering to vote provide, under oath, his or her social security number, if any. An application lacking this information will, therefore, be denied. Pursuant to Section 7 of the Federal Privacy Act (P.L. 93-579), be advised that this information may be released to government agencies for government purposes.

For Office Use Only

12. I.D. No. E 0 9 6	13. Location Code ____	14. Representative District/Precinct ____ / ____
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The office at which a person registers to vote is confidential. A person's declination to register to vote is also confidential and is used for voter registration purposes only (National Voter Registration Act of 1993).