

INDIANA ELECTION DIVISION
PO BOX 44528
INDIANAPOLIS, IN 46244-0528

FORWARDING SERVICE REQUESTED



PRESORTED
FIRST CLASS
U.S. POSTAGE
PAID
INDIANA ELECTION
DIVISION

Important Information

PLEASE OPEN

Dear <Full Name>, Please return this postcard not later than July 27, 2019.
If you are not <Full Name>, please disregard this mailing.

RESIDENCE ADDRESS MAILING ADDRESS COUNTY

SELECT ONLY ONE OPTION, COMPLETELY FILLING IN THE OVAL  NEXT TO YOUR CHOICE IN BLACK OR BLUE INK:

- #1:** The above residence address is my current Indiana residence address.
- #2:** I have moved my residence **OUTSIDE** of <County> County or **OUTSIDE** of Indiana.
Please contact your new county voter registration office to register to vote.
Indiana residents with a valid Indiana driver's license or Indiana State ID Card can register to vote online at Indianavoters.com.
- #3:** My **residence address** has changed **WITHIN** <County> County to:

_____, IN _____
RESIDENCE ADDRESS (no PO boxes) CITY ZIP

MAILING ADDRESS (if different from residence address) CITY STATE ZIP

IF YOU SELECTED OPTION #3, COMPLETELY FILL IN THE APPLICABLE OVALS BELOW:

Are you a citizen of the United States of America? YES NO

Will you be at least 18 years of age on or before election day? YES NO

I swear or affirm, under the penalties for perjury, the accuracy of the information I provided. If I selected Option #2 above, I authorize my voter registration record at any previous residence address to be cancelled. If I selected Option #3 above, I authorize my Indiana voter registration record to be updated.

PRINTED NAME – CHECK IF NAME CHANGE  SIGNATURE – **YOU MUST SIGN THIS CARD TO MAKE THIS CHANGE EFFECTIVE**