

South Dakota Voter Registration Form _____County

Use this form to: Register to vote or report a name, address, or party change.											
Please print. Complete the entire form. Return this form to your county auditor.											
The deadline for voter registration is 15 days before any election. Your form must be received by the county auditor by this deadline if you are to vote in the next election. Within 15 days you will receive a notice of your registration. If you do not, contact your county auditor. Any private person or entity registering voters is required to provide you with their contact information. For more information, visit www.sdsos.gov.											
	Are you a citizen of the United States of America?										
1	Will you be 18 years of age on or before the next election? Yes No										
	If you checked 'No' in response to either of these questions, do not complete this form.										
	Last Name	First Name	irst Name		lle N	ame(s),		Suffix			
2											
3	Residence Address		Apt. or Lot #	City					State	Zip Code	
	Mailing Address (if different)				City					State	Zip Code
4			'								
4a	If you live in a rural area and do not have a street address; if your residence address is a PO Box, rural box, or general delivery; or if you have no address, please describe the physical location of your residence in writing in the space below, which may include writing the names of the streets or intersections nearest to where you live and listing any landmarks (e.g., schools, churches, stores) near where you live:										
	Date of Birth (Required):		Telephone Number		7	SD Driver License (DL) # or SD Non-Driver ID #					
5	Month / Day / Year	6					(Required)				
,		ľ									
	Choice of Party – See information in	Email Address		If you do not have			nt have a cui	rent SD DI	or SD Non-Driver		
8	the box below:	ne box below:				ID, provide the last 4 dig					
Choice of Party Information: If you are currently registered to vote in South Dakota and you leave the choice of party field blank, you will remain											
registered with your current party affiliation. If you are not currently registered in South Dakota to vote and you leave the choice of party field blank,											
you will be entered as an independent/no party affiliation voter, which is not a political party in South Dakota. Previous Voter Registration Information Required Below. Use this section to cancel your previous voter registration:											
Prev	-			ction to cancer				ter re	gistration:		Suffix
10	revious Last Name First Name				Middle Name(s)						Sullix
	revious Address				City					State	Zip Code
11											
	Previous Driver License Number and State				Previous County						1
12											
13	Would you like to be a precinct election worker on election day?				Yes		No				
14	I declare, under penalty of perjury (2 years imprisonment and \$4,000 fine), that: *I am a citizen of the United States of America; *I actually live at and have no present intention of leaving the above address; *I will be 18 on or before the next election; *I have not been judged mentally incompetent; *I am not currently serving a sentence for a felony conviction; and *I authorize cancellation of my previous registration, if applicable.					Date:	Lowell		Signature R	equired	