VOTER REGISTRATION APPLICATION





Do you want us to contact you with important information that could impact your vote? Provide your email and/or mobile number so we can stay in touch.

Visit BrowardVotes.gov to:



Request a Vote-by-Mail Ballot after every General Election



Find your voting location



Update your address and contact information any time something changes



Become a Poll Worker













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Fort Lauderdale FL 33303-9928 P O BOX 29001 Broward County Supervisor of Elections

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Florida Voter Registration Application Instructions and Form (DS-DE 39, R1S-2.040, F.A.C.)(eff. 04/24/2024)
How to Register
 Complete and submit this form by mail or in person to: Supervisor of Elections' office (mailing addresses are on back of form), Any office that issues driver licenses,
 Any voter registration agency (public assistance office,
center for independent living, office serving persons with disabilities, public library, or armed forces recruitment office), or
o The Division of Elections
Register online: RegistertoVoteFlorida.gov (or QR code). Note: If a third-party voter registration organization (3PVRO) collects your
application, the 3PVRO must give you a receipt. The 3PVRO might not deliver your application within the 10 days or by the registration deadline. You can
choose instead to mail or deliver your application to your Supervisor of Elections or register online.
Voter Registration Requirements
 U.S. citizen and resident of Florida and county
 At least 18 years old (or 16 for pre-registration)
 Not adjudicated mentally incapacitated, or if so, voting rights restored.
 Not be convicted of a felony, or if so, voting rights restored.

Do not complete this form if you do not meet all of these requirements.

· If application is accepted, your Supervisor will mail a voter information card.

• Deadline to register is 29 days before an election.

· Deadline to change party is 29 days before a primary election.

DO NOT REMOVE - SEAL WHEN MAILING BACK

When to Register

Registration Status

Información: Sírvase llamar a la oficina del Supervisor de Elecciones de su condado si le interesa obtener este formulario en español.

Identification (ID) Requirements to Register or Update Record

- ·A current and valid Florida driver license (FL DL#), or Florida ID card number (FL ID#), or last four digits of your Social Security number (SSN).
- . Special requirements apply if registering by mail for the first time, never previously voted in Florida, and never issued a FL DL or ID card or SSN. You will be required to provide identification prior to voting

Florida has Closed Primaries/Political Party Affiliation

- You must be registered with a political party to vote in that party's primary elections. However, in primary elections, all voters can vote on nonpartisan issues and for candidates in that partisan primary race if the candidates face no opposition in the general election.
- •If registering for first time and you do not choose a party, you will be registered with no party affiliation (NPA). If you are already registered and do not choose a party, your party choice on record will remain the

Public Record

- · Most voter information, including phone number and email address is public. Your signature may be viewed but not copied.
- •The following is not public: FL DL#, FL ID#, SSN, where you registered to vote, and whether you declined to register or update your voter registration record at a voter registration agency or office that issues FL DL or FL ID cards.

Resources

- · Supervisor phone numbers are on back of form.
- · Division of Elections: https://dos.fl.gov/elections/
- Voter Assistance Hotline: 1.866.308.6739
- · Voter Information Lookup visit:

	f your application is incomplete or denied, your Supervisor will contact you.		Voter Information Lookup visit: https://registration.elections.myflorida.com/CheckVoterStatus					
• Contact your Supervisor if you have any additional questions. Rows 1 – 6 and 15 must be completed for an application to be processed. Print plainly and clearly using a black or blue pen.								
New registration Update or change (e.g., address, name, party affiliation, signature) Request to replace voter information card								
1	1 Are you a citizen of the United States of America? Yes No							
2	I affirm that I am not a convicted felon, or if I am, my right to vote has been restored.							
3	(For information on felon voting rights, visit Division of Elections' webpage - https://dos.fl.gov/felon) I affirm that I have not been adjudicated mentally incapacitated with respect to voting or, if I have, my competency has been restored.							
Ö	I A ASSESSMENT							
4	Plorida Driver License or identification	- Car	a Number (FL		no FL DL/ID)	I have never been issued a FL DL/ ID or SSN.		
5	Last name First name			Middle nar	ne	Suffix (Sr Jr I		
6	Residential address where you live in FL (no P.O. box or business addres	ss) Unit	City	Co	unty	Zip		
7	Mailing address (if different from above or mail not deliverable at residence)) Unit	City	Sta	ite or country	Zip		
8	Address where last registered	Unit	City	Sta	ite	Zip		
9	Former name (if named has changed) Gender F M State/country of birth							
10	Phone no. (optional) Email me sample ballot if available in my county. Email address:							
11	Party affiliation (choose one) (See Florida has Closed Primaries/Political Party Affiliation above)							
12	Race/ethnicity (choose one)							
13	Military/overseas status (choose one, if applicable) I am an active-duty Uniformed Services or Merchant Marine member or their spouse or dependent I reside outside U.S. but am a U.S. citizen							
14	I will need help voting.				Official use only			
15	I understand that it is a 3rd degree felony under state and federal laws to falsely swear or affirm or otherwise submit false information. Oath: I do solemnly swear (or affirm) that I will protect and defend the Constitution of the United States and the Constitution of the State of Florida, that I am qualified to register as an elector under the Constitution and laws of the State of Florida, and that all information provided in this application is true. FVRS No.							
	Signature X	Date		3PVRO No.	Agent Initials	Date Collected		