

Indiana Election Division:
Trent Deckard, Co-Director



Voter Registration Form
Changes



Summary Change to Voter Registration

- *Centered on 3 major areas:*
 - 1. Certified Statement (to be completed by a third party receiving a voter registration form an applicant has given to them)
 - 2. New 10 day turnaround (effective Dec. 31, 2013)!
 - 3. Receipt provided to applicant by third party (as part of the form)
 - Other changes which we will discuss...



NEW

10 Day Turnaround

- A person receiving a completed voter registration application from another person must file application with county voter registration office (or IED) no later than noon 10 days after receiving the application
- Or close of registration, whichever first



10 Day Turnaround (Cont.)

- If a voter registration application is delivered to a county after the 10 day deadline, the application may not be rejected solely for that reason.
- New code requires the county voter registration office to notify the county election board not later than 3 days after receipt of application for “appropriate action”.



“Appropriate Action” (IC 3-6-5-31)

Sec. 31. If a county election board determines that there is substantial reason to believe an election law violation has occurred, it shall expeditiously make an investigation. If in the judgment of the board, after affording due notice and an opportunity for a hearing, a person has engaged or is about to engage in an act or practice that constitutes or will constitute a violation of a provision of this title or of a rule or order issued under this title, the board shall take the action it considers appropriate under the circumstances, including referring the matter to the attorney general or the appropriate prosecuting attorney.

As added by P.L.5-1986, SEC.2.

Exemptions to a 10 Day Turnaround:

Requirement **does not** apply to:

- A state or local office receiving an application by online voter registration system;
- A “full service” voter registration agency (already subject to a 5 day deadline)
- U.S. Postal Service, bonded courier or IED
- A member of applicant’s household or attorney in fact.



Question: *How will we know date received by another person?*

- Answer: The VR forms will state the date on which the person took custody of a completed form from an applicant through a cert. statement.



Question: *Why is change of 10 Day Turnaround significant?*

- Former law (prior to July 1) required only that the completed form be turned in by close of voter registration. This new change to a 10 Day Turnaround will require greater public education. You should plan on notifying various stakeholders and media.



New Voter Registration Forms

Description: After December 31, 2013 a voter registration form approved by the Indiana Election Commission must include:

1. A receipt to be given to the applicant when another person takes custody of the voter registration application; and
2. A certified statement regarding the name, address of person taking custody along with date received.



False or Fraudulent Applications

- A person who receives completed voter registration application of another and believes application to be false or fraudulent shall deliver application to appropriate county election board by deadline with a sworn statement indicating why the person believes the application is false
- County Election Board is required to consider “appropriate action”



Failure to Deliver or Destruction

Under the new IC 3-14-2-5:

It is a Class A misdemeanor to recklessly destroy or fail to file or deliver a completed registration form of another as required by the law.



“Incomplete” Voter Registration Changes

- Includes failing to provide voter identification number (last four digits of social security #, driver’s license or state identification #, or indicating none)
- County voter registration will now attempt to contact voter to determine eligibility and get information



Other Big “Incomplete” Voter Registration Change

- New versions of the form will require another person receiving an applicant’s application to be identified in a cert. statement (name, residence address, date they took custody, signature)
- Failure to include this information makes form incomplete*



“Incomplete” Cert. Statement

- Even if cert. statement is incomplete due to lack of information (and if application contains all other necessary information) the county voter registration will make (1) effort to contact the individual receiving completed application and (1) effort to contact the voter to obtain the missing information.



“Incomplete” Cert. Statement (cont.)

- County shall process application when information received, and/or
- Shall also process the application if the county voter registration office cannot obtain the information or signature of third party and application is otherwise complete
- County may not reject the application solely on incomplete cert. statement



“Incomplete” Cert. Statement (cont.)

- The county voter registration office shall, not later than 3 days after receipt of the application, provide notice of the failure to properly complete the application to the county election board for appropriate action.



Exemptions to Cert. Statement:

Requirement **does not** apply to:

- A state or local office receiving an application by online voter registration system;
- A “full service” voter registration agency (already subject to a 5 day deadline)
- U.S. Postal Service, bonded courier or IED
- A member of applicant’s household or attorney in fact.



Receipt

- New forms must include a receipt to be given to the applicant when another person takes custody of the voter registration application
- Must state the name and residence address of the individual and the date on which the individual took custody of the application



Exemptions to Reciept:

Requirement **does not** apply to:

- A state or local office receiving an application by online voter registration system;
- A “full service” voter registration agency (already subject to a 5 day deadline)
- U.S. Postal Service, bonded courier or IED
- A member of applicant’s household or attorney in fact.



New Form Timeline

- IED is drafting new form for Indiana Election Commission approval
- Complexity of code will require careful consideration
- Will be seeking feedback from stakeholders
- Form should be friendly to users, distributors, and administrators
- Targeting early August to submit draft proposals

Takeaways to Remember!

- Education is needed about new forms to stakeholders
- New forms should be given to mail-distribution sites designated in your county NVRA plan
- Current VRG forms grandfathered in until Dec. 31
- 10 Day Turnaround active after Dec. 31, 2013
- Forms will contain Cert. Statement and Receipt
- Encourage people to read the form!

2013 IVRA Conference

Voter Registration

Overview

- Acceptable voter registration applications
- Filing methods and deadlines
- Processing applications
- Assistance to voters with disabilities

Who Can Register

- U.S. Citizens
- 18 years old at election
- Reside continuously in precinct 30 days prior
- Not incarcerated following conviction

Acceptable Registration Forms

- VRG-7 and VRG-11 (Spanish and English)
- VRG-6
- National Mail Registration Form
(Spanish and English)
- Federal Post Card Application (FPCA),
Form 76
 - Absent Uniformed Services Voter
 - Spouses and Dependents of above
 - Overseas Voters



INDIANA VOTER REGISTRATION APPLICATION

State Form 50504 (R7/8-11)
Indiana Election Commission

(VRG-7)

You can use this application to:

- Apply to register to vote in Indiana or
- Change your name and address on your voter registration record.

To register you must:

- Be a citizen of the United States;
- Be at least 18 years old on the day of the next general or municipal election;
- Have lived in your precinct for at least 30 days before the next election (except for certain military voters); and
- Not currently be imprisoned after being convicted of a crime.

If you move:

- You must transfer your registration whenever you move out of your precinct.
- You may use this application to transfer your registration. You may mail or hand deliver the completed application to your county registration office.

To complete this form:

FILL IN ALL THE BOXES THAT APPLY TO YOU IN BLUE OR BLACK INK

Box 4: Residence Address Type or print the address where you live (number, street, apartment number, city/town, and ZIP code). If your address is a rural route or star route, be sure to include the box number. If this address does not have a street number, draw a map in Box 15.

Box 5: Mailing Address If this address is the same as Box 4, just print "SAME" in this box.

Box 6: Previous Voter Registration Address If you have been registered previously, please list your most recent registration address.

Boxes 8 and 9: These questions are optional. Your application will be processed even if you do not answer these questions.

Box 10: Identification Documentation If you are registering to vote in Indiana for the first time, and you are sending this application by mail, you must provide identification documentation. Identification may include a current and valid photo id, current utility bill, bank statement, government check, paycheck, or government document that shows the name and address of the voter. You may include a copy of your identification with this application. Do not mail an ORIGINAL copy of your document! If you do not provide identification with this application or to the county voter registration office before election day, you will be asked for it the first time you vote.

Box 11: If you check "no" in response to the question in Box 11, you may not complete this application.

Box 12: The question in Box 12 requires a person to be at least 18 years of age by the next general or municipal election. If you check "no" in response to the question in Box 12, you may not complete this application.

Box 13: Voter Identification Number In Box 13, you are required to provide your Indiana driver's license number as issued by the Indiana Bureau of Motor Vehicles. If you do not have an Indiana driver's license, provide the last four digits of your social security number. If you do not have an Indiana driver's license number, or a social security number, a voter identification number will be assigned to you.

Box 14: If this is an application for a name change, provide your previous name in Box 14. If you have not changed your name, skip this question.

Box 15: Skip this question if the address where you live has a street name and number (such as 100 Maple Street). If you have a rural route or star route address, please draw a simple map that shows the nearest crossroads or street intersection and where your residence is located. If you do not live in a house or other building, please draw a map that shows where you usually sleep and the nearby streets.

Box 16: This application cannot be processed without the voter's original signature in this section. DO NOT FAX OR EMAIL THIS FORM AFTER COMPLETING IT.

Registration Deadlines: In order to be processed for the next election, this application must be postmarked or hand delivered to your county voter registration office no later than 29 days before the next election. If your county registration office receives this application after that day, you will be unable to vote in the next election. If you miss this deadline, your registration application will be processed when registration reopens. Some military voters and their family members can register until noon on election day. Contact your county voter registration office for information if you may qualify to do so.

Acknowledgment Notice: You will be sent a notice from your county voter registration office that acknowledges receipt of your voter registration application. The notice informs you whether your registration application was approved by the county voter registration office. The notice may identify where you can vote. If your registration application is incomplete, you may be contacted and asked to provide additional information. If you have not received an acknowledgment notice within 30 days of filing this application you should contact your county voter registration office.

Questions? Call your county voter registration office or the Indiana Election Division for assistance.

Indiana Election Division

302 West Washington Street, Room E204
Indianapolis, Indiana 46204-2743
Telephone: 317-232-3939 or Toll-free Indiana only: 800-622-4941
www.in.gov/sos/elections

VRG-7

If Not Typed, Please Print in Blue or Black Ink

1	Check boxes that apply: <input type="checkbox"/> New registration <input type="checkbox"/> Address change (See Box 6) <input type="checkbox"/> Name change (See Box 14)	2	Indiana county where you live:	COUNTY USE ONLY	Date processed	Township/Precinct	County Tracking Number
3	Gender <input type="checkbox"/> Female <input type="checkbox"/> Male	Last Name	First Name	Middle Name or Initial	Suffix Jr. Sr. II III IV		
4	Residence Address (No Post Office Boxes)		Apt. No.	City / Town	State IN	Zip Code	
5	Mailing Address, if different from Box 4, if same, print "SAME"		Apt. No.	City / Town	State	Zip Code	
6	Previous Voter Registration Address		County	Apt. No.	City / Town	State	Zip Code
7	Date of Birth (mm/dd/yy)	8	Telephone number (if available)	9	E-mail (if available)	10	Are you including identification documentation? (See instructions for Box 10 above.) <input type="checkbox"/> Yes <input type="checkbox"/> No
11	Are you a citizen of the United States of America? <input type="checkbox"/> Yes <input type="checkbox"/> No	12	Will you be at least 18 years of age on or before election day? <input type="checkbox"/> Yes <input type="checkbox"/> No	13	Voter Identification Number Provide your 10-digit Indiana issued driver's license number. If you do not possess an Indiana driver's license, then provide the last 4 digits of your social security number here.	<input type="checkbox"/> Driver's License Number <input type="checkbox"/> Social Security Number <input type="checkbox"/> None	
14	If you have changed your name, what was your name before you changed it? If you have not changed your name, skip this question.	Last Name	First Name	Middle Name or Initial	Suffix Jr. Sr. II III IV		
15	Map/Diagram: If your residence has no address, street number or name (such as 100 Maple Street), please draw a map showing where your residence is located, include roads and landmarks. Otherwise, skip this question. N	I authorize my voter registration at any other address to be cancelled. I swear or affirm that: <ul style="list-style-type: none"> • I am a citizen of the United States. • I will be at least 18 years of age at the next general or municipal election. • I will have lived in my precinct for at least 30 days before the next election. • I am not currently in prison after being convicted of a crime. • All the above information and all other statements on this form are true. • I understand that if I sign this statement knowing that it is not true I am committing perjury and can be fined up to \$10,000, jailed for up to three years or both. 					
16	Signature of Applicant		Date				
If applicant is unable to fill out the application due to disability, the person who helped the applicant with this application lists their name, address and telephone number in the box below. (Telephone number is optional.)							
Name		Address		City/Town		Telephone Number (optional)	

Valid until 12/31/13



INDIANA AGENCY VOTER REGISTRATION APPLICATION

State Form 46914 (R/9-11)

Indiana Election Commission

(VRG-6)

Receipt or Declination of Voter Registration KEEP THIS RECEIPT FOR YOUR RECORDS

Printed Name	Date (mm/dd/yyyy)
Signature	County of Residence
Address	Registration Office Address
	Name of Agency Employee

If you are not registered to vote where you live now, would you like to apply to register to vote today?

- Yes (The agency where you apply to register is confidential.)
 No (I am registered to vote at the address where I live.)
 No

IF YOU DO NOT CHECK ANY BOX, YOU WILL BE CONSIDERED TO HAVE DECIDED NOT TO REGISTER TO VOTE AT THIS TIME. The fact that you have checked "NO" is confidential and the information will be used only for voter registration purposes. If you would like help filling out the voter registration form, we will help you. The decision whether to seek or accept help is yours. You may fill out the application form in private. Applying to register or declining to register to vote will not affect the amount of assistance that you will be provided by this agency.

Box 10: Identification Documentation This documentation is only required for individuals registering to vote in Indiana for the first time, and are sending the application by mail. Individuals applying to register at an agency are not required to provide identification documentation.

Box 13: Voter Identification Number In Box 13, you are required to provide your Indiana driver's license number as issued by the Bureau of Motor Vehicles. If you do not have an Indiana driver's license, provide the last four digits of your social security number. If you do not have an Indiana driver's license number, or a social security number, a voter identification number will be assigned to you.

Acknowledgment Notice: Your application will be forwarded to your county voter registration office. The county office will send to you a notice acknowledging receipt of your voter registration application. The notice informs you whether your registration application was approved by the county voter registration office. The notice may identify where you can vote. If you have not received an acknowledgement notice within 30 days of completing this application, you should contact your county voter registration office. TAKE THIS RECEIPT TO YOUR POLLING PLACE ON ELECTION DAY. IF THIS RECEIPT INDICATES THAT YOU APPLIED TO REGISTER AT LEAST 29 DAYS BEFORE THE ELECTION YOUR RECEIPT WILL SERVE AS PROOF THAT YOU DID APPLY AND WILL PERMIT YOU TO VOTE ON ELECTION DAY, UNLESS THE COUNTY VOTER REGISTRATION OFFICE REJECTED YOUR APPLICATION.

If you believe that someone has interfered with your right to vote, your right to privacy in deciding whether to register or in applying to vote, or your right to choose your own political party or political preference, you may file a complaint with the Co-Directors of the Indiana Election Division, 302 West Washington Street, Room E204, Indianapolis, Indiana 46204-2743; (317)232-3939. If you want, you may first try to solve the problem by filing a complaint with the county voter registration office of the county where the violation occurred.

VRG-6

If Not Typed, Please Print in Blue or Black Ink

1	Check boxes that apply: <input type="checkbox"/> New registration <input type="checkbox"/> Address change (See Box 6) <input type="checkbox"/> Name change (See Box 14)	2	Indiana county where you live:	COUNTY USE ONLY	Date processed	Township/Precinct	County Tracking Number
3	Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male	Last Name	First Name	Middle Name or Initial	Suffix Jr. Sr. II III IV		
4	Residence Address (No Post Office Boxes)		Apt. No.	City / Town	State IN	Zip Code	
5	Mailing Address, if different from Box 4, if same, print "SAME"		Apt. No.	City / Town	State	Zip Code	
6	Previous Voter Registration Address		County	Apt. No.	City / Town	State	Zip Code
7	Date of Birth (mm/dd/yyyy)	8	Telephone number (if available)	9	E-mail (if available)	10	Are you including identification documentation? (See instructions for Box 10 above.) <input type="checkbox"/> Yes <input type="checkbox"/> No
11	Are you a citizen of the United States of America? <input type="checkbox"/> Yes <input type="checkbox"/> No	12	Will you be at least 18 years of age on or before election day? <input type="checkbox"/> Yes <input type="checkbox"/> No	13	Voter Identification Number Provide your 16-digit Indiana issued drivers license number. If you do not possess an Indiana driver's license, then provide the last 4 digits of your social security number here. <input type="checkbox"/> Driver's License Number <input type="checkbox"/> Social Security Number <input type="checkbox"/> None		
14	If you have changed your name, what was your name before you changed it? If you have not changed your name, skip this question.	Last Name	First Name	Middle Name or Initial	Suffix Jr. Sr. II III IV		
15	Map/Diagram: If your residence has no address, street number or name (such as 100 Maple Street), please draw a map showing where your residence is located, include roads and landmarks. Otherwise, skip this question. N	I authorize my voter registration at any other address to be cancelled. I swear or affirm that: • I am a citizen of the United States. • I will be at least 18 years of age at the next general or municipal election. • I will have lived in my precinct for at least 30 days before the next election. • I am not currently in prison after being convicted of a crime. • All the above information and all other statements on this form are true. • I understand that if I sign this statement knowing that it is not true I am committing perjury and can be fined up to \$10,000, jailed for up to three years or both.					
	W	E	16	Signature of Applicant	Date		
	S	If applicant is unable to fill out the application due to disability, the person who helped the applicant with this application lists their name, address and telephone number in the box below. (Telephone number is optional.)					
		Name	Address	City/Town	Telephone Number (optional)		

National Mail Voter Registration Form

http://www.eac.gov/voter_resources/register_to_vote.aspx

Voter Registration Application

Before completing this form, review the General, Application, and State specific instructions.

Are you a citizen of the United States of America? <input type="checkbox"/> Yes <input type="checkbox"/> No		This space for office use only.	
Will you be 18 years old on or before election day? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If you checked "No" in response to either of these questions, do not complete form. (Please see state-specific instructions for rules regarding eligibility to register prior to age 18.)			
1	<input type="checkbox"/> Mr. <input type="checkbox"/> Miss <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms.	Last Name	First Name Middle Name(s) <input type="checkbox"/> Jr <input type="checkbox"/> II <input type="checkbox"/> Sr <input type="checkbox"/> III <input type="checkbox"/> IV
2	Home Address		Apt. or Lot # City/Town State Zip Code
3	Address Where You Get Your Mail If Different From Above		City/Town State Zip Code
4	Date of Birth Month Day Year	5 Telephone Number (optional)	6 ID Number - (See item 6 in the instructions for your state)
7	Choice of Party (see item 7 in the instructions for your State)	8 Race or Ethnic Group (see item 8 in the instructions for your State)	
9	I have reviewed my state's instructions and I swear/affirm that: <ul style="list-style-type: none"> I am a United States citizen I meet the eligibility requirements of my state and subscribe to any oath required. The information I have provided is true to the best of my knowledge under penalty of perjury. If I have provided false information, I may be fined, imprisoned, or (if not a U.S. citizen) deported from or refused entry to the United States. 		<div style="border: 1px solid black; height: 40px; width: 100%;"></div> <p style="text-align: right;">Please sign full name (or put mark) ▲</p> <p>Date: <input style="width: 100px;" type="text"/></p> <p style="text-align: center;">Month Day Year</p>

If you are registering to vote for the first time: please refer to the application instructions for information on submitting copies of valid identification documents with this form.

Please fill out the sections below if they apply to you.

If this application is for a **change of name**, what was your name before you changed it?

A	<input type="checkbox"/> Mr. <input type="checkbox"/> Miss <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms.	Last Name	First Name	Middle Name(s) <input type="checkbox"/> Jr <input type="checkbox"/> II <input type="checkbox"/> Sr <input type="checkbox"/> III <input type="checkbox"/> IV
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If you were **registered before** but **this is the first time you are registering from the address in Box 2**, what was your address where you were registered before?

B	Street (or route and box number)	Apt. or Lot #	City/Town/County	State	Zip Code
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If you live in a rural area but do not have a street number, or if you have no address, please show on the map where you live.

C	<ul style="list-style-type: none"> Write in the names of the crossroads (or streets) nearest to where you live. Draw an X to show where you live. Use a dot to show any schools, churches, stores, or other landmarks near where you live, and write the name of the landmark. 	<div style="text-align: right;">NORTH ↑</div>
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If the applicant is unable to sign, who helped the applicant fill out this application? Give name, address and phone number (phone number optional).

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FPCA Form For Absent Military and Overseas Applicants (Form 76)

(After completion, fold to inside and seal before mailing.)

WARNING: Knowingly presenting false information in this application could result in criminal sanctions.

Standard Form 76 (Rev. 10-2002)
NSN 7540-00-034-0003

REGISTRATION AND ABSENTEE BALLOT REQUEST - FEDERAL POST CARD APPLICATION (FPCA)					
1. I REQUEST ABSENTEE BALLOTS FOR ALL ELECTIONS IN WHICH I AM ELIGIBLE TO VOTE AND I AM (Mark only one): <input type="checkbox"/> (a) A MEMBER OF THE UNIFORMED SERVICES OR MERCHANT MARINE ON ACTIVE DUTY, OR AN ELIGIBLE SPOUSE OR DEPENDENT <input type="checkbox"/> (b) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. TEMPORARILY <input type="checkbox"/> (c) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY					
2. MY INFORMATION (Required)					
a. TYPED OR PRINTED NAME (Last, First, Middle)				b. SUFFIX (Jr., Sr., III, etc.)	c. PREVIOUS NAME (if applicable)
d. SEX <input type="checkbox"/> M <input type="checkbox"/> F	e. GRADE	f. DATE OF BIRTH M M D D Y Y Y Y	g. SOCIAL SECURITY NUMBER -- -- -- -- --	h. STATE DRIVERS LICENSE OR I.D. NUMBER	
i. TELEPHONE NUMBER (No DSN number; include all international prefixes)			j. FAX NUMBER (No DSN number; include all international prefixes)		
k. HOME ADDRESS					
3. MY VOTING RESIDENCE ADDRESS (Required) (Military, use legal residence. Overseas citizens, use last legal residence in U.S.)					
l. NUMBER AND STREET (Include P.O. Box)					
m. CITY, TOWN OR VILLAGE		n. COUNTY		o. STATE	p. ZIP CODE --
4. WHERE TO SEND MY VOTING MATERIALS					
q. MY CURRENT ADDRESS (Where I live now) (Required)			r. MY FORWARDING ADDRESS (NOTE: Complete 4b, only if you do not want your ballot mailed to the address in block 4a.)		
s. I PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: <input type="checkbox"/> MAIL <input type="checkbox"/> FAX <input type="checkbox"/> EMAIL					
t. MY POLITICAL PARTY PREFERENCE (Optional, but may be required by state to register to vote in primary elections):					
u. ADDITIONAL INFORMATION (Designate the period for which you want to receive ballots - see instructions for block d, paragraph (1). Consult the Voting Assistance Guide for other specific state instructions.)					
v. AFFIRMATION (Required) I swear or affirm, under penalty of perjury, that: 1. I am a member of the Uniformed Services or merchant marine on active duty or an eligible spouse or dependent of such a member, or a U.S. citizen temporarily residing outside the U.S., or other U.S. citizen residing outside the U.S., and 2. I am a U.S. citizen, at least 18 years of age (or will be by the day of the election), eligible to vote in the requested jurisdiction, and 3. I have not been convicted of a felony or other disqualifying offense or been adjudicated mentally incompetent, or if so, my voting rights have been reinstated, and 4. I am not registering, requesting a ballot, or voting in any other jurisdiction in the U.S., and 5. My signatures and date below indicate when I completed this document, and 6. The information on this form is true and complete to the best of my knowledge. I understand that a material misstatement of fact in completion of this document may constitute grounds for conviction of perjury.					
Signed: _____		Date: _____		Date: _____	
		M M D D Y Y Y Y		M M D D Y Y Y Y	

The information contained herein is for official use only. Any unauthorized release of this information may be punishable by law.

Adobe Designer 8.0

<http://www.fvap.gov/resources/media/fpca.pdf>

Online Voter Registration

- New in 2010
- IC 3-7-26.7
- Anyone with a valid and current Indiana driver's license or photo identification card
- www.IndianaVoters.com
- Online Voter Registration Step by Step in SVRS

Access to Registration Forms

- Full service voter registration agencies
 - BMV
 - Public Assistance Agencies (FSSA, DOH, DWD)
 - Armed Forces Recruitment Offices
 - Any additional locations contracted by county
- Mail distribution sites
 - Libraries, schools, trustee, city and town clerk/treasurer's office, license branches...
- Online
- Voter registration drives

Delivery of Voter Registration Forms

- Mail/UPS/FedEx
- Hand delivery
- Fax (UOCAVA voters only)
- Email (UOCAVA voters only)
- Online (online applicants only)

- *UOCAVA--for Uniformed Overseas Citizens Absentee Voting Act
- *MOVE—Military and Overseas Voting Empowerment Act

Voter Registration Deadlines

- 29 days before election
- 10 days before election for UOCAVA voters using FPCA
- Noon, Election Day for certain absent uniformed services voters (very rare)

Timely Filing of Voter Registration Applications

- Hand delivered—close of business
- Mail-postmarked by 11:59 pm 29th day
- Missing or illegible postmark-received thru mail by Monday after close of registration
- Online-submitted by 11:59 pm on 29th day

IC 3-7-33

Location of Filing Registration Forms

- Indiana Election Division (IED)
 - IED will forward applications with a notice
- Full service voter registration agency
- County voter registration
 - Counties receiving applications for another county will forward application to correct county or residence

Resources for county users

- Standard Operating Procedures
 - VRG 5.1 Handling VR Apps from outside county
 - VRG 51.1 Handling Ongoing ABS applications
- Step by Step and other guidance
 - Auto Cancel Registrations
 - Online Voter Registration
- Voter Registration Guidebook (purple)

Incomplete Applications

- Applicant **MUST** provide following:
 - Name
 - Residence Address or diagram
 - Date of birth
 - Citizenship affirmation
 - Age affirmation
 - Voter identification information
 - New in 2013...applicant must check one of three boxes
 - Signature of applicant (or applicant's name if physically unable to sign)

Processing Incomplete Applications

- IC 3-7-33-4.5
- Missing essential information=incomplete application
- County must make one effort to contact applicant by phone and one effort by mail

Completing an Incomplete Application

- Can be supplied by phone up until 10th day before election
 - Name
 - Residence or mailing address
 - Date of birth
 - Voter identification information
- Can be supplied in writing up until the 10th day before election
 - Signature
- Can be supplied in writing up until the 29th day before election
 - Citizenship Affirmation
 - Age Affirmation

Assistance to Voters with Disabilities

- Voters with disabilities are entitled to register and vote—Indiana has special procedures
- Make your mark (i.e. “X”) if possible
- If unable to make mark, another can sign applicant’s name provided one who assists provides their own name and residence address in space provided.
- IC 3-7-32-7 (Amended in 2013)

Conclusion

- Variety of voter registration applications
- Transmission methods
- Filing deadlines
- Incomplete applications

Leslie Barnes, Co-General Counsel
317-232-3942 Lbarnes@iec.in.gov