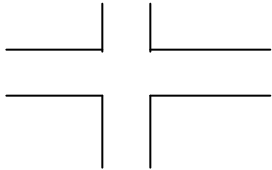


<b>1 CHECK APPLICABLE BOX</b> NEW REGISTRATION NAME CHANGE REQUEST ADDRESS CHANGE	Official Use Only Reg Type ____ Wd/Dist ____ Pct ____ In ____ Out ____ Comp Reg # _____
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<b>2. NAME OF APPLICANT (PLEASE PRINT)</b> LAST FIRST MIDDLE OR MAIDEN	<b>GIVE LOCATION</b> 
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<b>3. RESIDENCE ADDRESS</b> (Must be address where you claim homestead exemption, if any)	
House or Apt No and Street (if Rural, Route & Box No.)	City or Town State Zip
Mailing Address if different	

<b>4. AGE</b>	<b>5. DATE OF BIRTH</b>	<b>6. *SOCIAL SECURITY NO.</b>	<b>7. SEX (Choose One)</b>	<b>8. * RACE / ETHNIC ORIGIN (Choose One)</b>
	MONTH DAY YEAR		MALE FEMALE	WHITE BLACK ASIAN HISPANIC AMERICAN OTHER _____

<b>9. PARTY AFFILIATION (Choose One)</b>	<b>10. APPLICANT'S PLACE OF BIRTH</b>	<b>11. * DAYTIME PHONE</b>
DEM REP REFORM PARTY NONE OTHER (specify) _____	CITY OR TOWN PARISH OR COUNTY STATE COUNTRY	( )

<b>12 * HOME PHONE</b>	<b>13. FORMER RESIDENCE AND REGISTRATION ADDRESS</b>	<b>14. MOTHER'S MAIDEN NAME</b>
( )	ADDRESS PARISH OR COUNTY STATE	

<b>15. FORMER REGISTERED NAME, IF APPLICABLE</b>	<b>16. Will you require assistance at the polls? (Choose one) yes no</b> Give reason:

<b>17. If you are unable to sign your name, two witnesses to your mark must sign here:</b>	
Signature	Signature

**AFFIRMATION:** I do hereby solemnly swear or affirm that I am a citizen of the United States, a bona fide resident of this state and parish, that I am not currently under an order of imprisonment for conviction of a felony, that I am not currently under a judgment of interdiction for mental incompetence, and that the facts given by me on this application are true to the best of my knowledge and belief. If I have provided false information, I may be subject to a fine of not more than \$1,000 (\$2,500 for subsequent offense) or imprisonment for not more than 1 year (5 years for subsequent offense) or both.

<b>18.</b> <b>SIGN YOUR NAME IN BOX AT RIGHT</b> Date: ____/____/____
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\* **Optional**