

You have a choice. Registered voters will receive mail ballots for all elections.

Use this form to let us know that:

- You want to vote in person and do not want a mail ballot. You must submit this form at least 60 days before the next election.
- You now want to receive a mail ballot after you previously indicated you wanted to vote in person.

Voter Information		Last name		First name	
		Middle name		Date of birth (mm/dd/yyyy)	
		NV driver's license or ID card# (if applicable)			
Permanent voter address					
	2	StreetCity	State		
Mail ballot preference	(I want to vote in person	_	Send me a ballot	
Check only one option.	3	Do not send me a ballot. Submit this form at least 60 days before the next election so we can remove your name from the mailing lists.	R	I want to vote by mail in the follow ☐ All Future Elections ☐ Next Presidential Preference ☐ Next Primary Election Only ☐ Next General Election Only ☐ Next Special Election Only	re Election Only y y
Where should we send your ballot? Check only one option. Only complete this section	iı (A different address: Street/ P.O. Box	•		Unit#
if you are voting by mail.	4	City If you want this address to be your new permane registration or check here:			Zipov_to update your voter
Contact information For official communication nly.	5	Phone Emai			
My permanent voter addr	Ty permanent voter address			(Your email address is confidential)	
Signature		${f I}$ certify that all the information on this form is ${f true}$	e and corr	rect.	
Required		I understand that this will not affect my status as a registered voter.			
	6	Voter signature X		Date (a	mm/dd/yyyy)
For Official Use Only Registration #		You must submit this form at least 60 days bel	ore the n	ext election.	