## Assistance provided to a person who, because of a disability, or otherwise, is unable to complete and sign the Voter Registration Application

## Instructions:

- 1) On the face of the Voter Registration Application, the voter registration distributor must fill out the information about the applicant, except for the signature in Box 12. If the applicant is unable to sign, they may mark an "X" or other mark in Box 12.
- 2) Please fill in the name of the applicant legibly in the blank space provided below.
- 3) Voter Registration Distributors must then sign and date this form.
- 4) This form **must** be stapled to the Voter Registration Application.

## **Voter Registration Distributor Affirmation**

	states that they are unable to complete and sign a voter. The applicant affirms that they meet the qualifications necessary to s shown on the voter registration application) and that the information
Today's Date	
Voter Registration Distributor Name (Prin	nted)
Voter Registration Distributor Signature	