

# EASTERN SHAWNEE TRIBE OF OKLAHOMA VOTER REGISTRATION APPLICATION

1. **Persons Who Can Register** You can register to vote if you are a member of the Eastern Shawnee Tribe of Oklahoma, and 18 years old or older.
2. Read the oath carefully. Sign and date it in ink. If you cannot sign your name, make your mark and give the name of the person who helped you.
3. All voters must request a ballot.

**WARNING; All answers on this application must be true. A penalty may be assessed for any false information given. This information will be used to determine voter eligibility protected by the Privacy Act.**

<b>Voter Registration #</b>

*Use black ink. All areas must be filled out. After you complete this application, use proper postage and mail or FAX (918) 666-7478  
Eastern Shawnee Election Board, P.O. Box 1200, Seneca, Missouri 64865.*

Last Name (Print)	First Name (Print)	Middle Name (Print)	Suffix
/ /			
Date of Birth (MM/DD/YYYY)	Tribal Roll Number	Male <input type="checkbox"/> Female <input type="checkbox"/>	

**Address:**

Address	City	State	Zip	County
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**Mailing Address** (If different from address) :

Address	City	State	Zip
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**Former Name**

Last Name (Print)	First Name (Print)	Middle Name (Print)
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*If someone helped you fill out this application, give name and address.*

First Name (Print)	Last Name (Print)
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Address	City	State	Zip
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**OATH I swear or affirm that:**

- I am a member of the Eastern Shawnee Tribe of Oklahoma.
- I am 18 years of age or older Or I will be 18 on or before the date of the next election.
- The information I have given is true and I reside at the address given.

X \_\_\_\_\_  
Signature or Mark of Applicant

I want to receive a ballot

Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Election Board: ~~(918) 666-2105 ext. 225~~  
918-666-5151 ext. 1065