

FWAB	Registration (Block 1)	Date of Birth (Block 4)	Identification (Block 4)			Political Party (Block 6)	Additional Requirements (Block 9)	Witness Signature (Affirmation)	FWAB Submission Methods		
	The FWAB can be used for registration.	These States require voters to provide their date of birth.	These States require voters to provide one of these ID numbers.			To vote in a primary election, voters must indicate a party preference in these States.	These States require additional information. (see Notes on FWAB State Instructions)	Witness signature is required.	Mail	Fax	Email/Online
			Last 4 of SSN #	Full SSN #	State ID #						
Alabama	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	2 witnesses	<input checked="" type="checkbox"/>	--	--
Alaska	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	1 witness	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--
American Samoa	--	<input checked="" type="checkbox"/>	--	--	--	--	--	--	<input checked="" type="checkbox"/>	--	--
Arizona	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Arkansas	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--
California	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	<input checked="" type="checkbox"/>	See note	--	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--
Colorado	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Connecticut	--	<input checked="" type="checkbox"/>	--	--	--	<input checked="" type="checkbox"/>	--	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Delaware	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
District of Columbia	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Florida	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--
Georgia	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	--	<input checked="" type="checkbox"/>	--	--
Guam	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	<input checked="" type="checkbox"/>	--	--	--	<input checked="" type="checkbox"/>	--	--
Hawaii	--	<input checked="" type="checkbox"/>	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	--	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--
Idaho	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	--	<input checked="" type="checkbox"/>	--	--
Illinois	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--
Indiana	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Iowa	--	<input checked="" type="checkbox"/>	--	--	--	<input checked="" type="checkbox"/>	--	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Kansas	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Kentucky	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Louisiana	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--
Maine	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Maryland	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	--	<input checked="" type="checkbox"/>	--	--
Massachusetts	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	--	--	<input checked="" type="checkbox"/>	--	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Michigan	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	--	<input checked="" type="checkbox"/>	--	--
Minnesota	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	<input checked="" type="checkbox"/>	--	--	--	<input checked="" type="checkbox"/>	--	--
Mississippi	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Missouri	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Montana	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Nebraska	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	<input checked="" type="checkbox"/>	--	--	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--
Nevada	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
New Hampshire	--	<input checked="" type="checkbox"/>	--	--	--	<input checked="" type="checkbox"/>	--	--	<input checked="" type="checkbox"/>	--	--
New Jersey	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	--	<input checked="" type="checkbox"/>	--	--
New Mexico	--	<input checked="" type="checkbox"/>	--	<input checked="" type="checkbox"/>	--	<input checked="" type="checkbox"/>	--	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
New York	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	--	<input checked="" type="checkbox"/>	--	--
North Carolina	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
North Dakota	N/A	<input checked="" type="checkbox"/>	--	--	--	--	--	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Ohio	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	--	<input checked="" type="checkbox"/>	--	--
Oklahoma	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--
Oregon	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	<input checked="" type="checkbox"/>	See note	--	--	<input checked="" type="checkbox"/>	--	--
Pennsylvania	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	--	--	--	--	--	<input checked="" type="checkbox"/>	--	--
Puerto Rico	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	<input checked="" type="checkbox"/>	--	--
Rhode Island	--	<input checked="" type="checkbox"/>	--	--	--	<input checked="" type="checkbox"/>	--	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--
South Carolina	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	<input checked="" type="checkbox"/>	--	<input checked="" type="checkbox"/>	--	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
South Dakota	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	<input checked="" type="checkbox"/>	--	--
Tennessee	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	<input checked="" type="checkbox"/>	--	<input checked="" type="checkbox"/>	--	--	<input checked="" type="checkbox"/>	--	--
Texas	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--
Utah	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Vermont	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Virgin Islands	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Virginia	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	<input checked="" type="checkbox"/>	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	1 witness	<input checked="" type="checkbox"/>	--	--
Washington	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--	--	--	--	--	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
West Virginia	--	<input checked="" type="checkbox"/>	--	--	--	<input checked="" type="checkbox"/>	--	--	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Wisconsin	--	<input checked="" type="checkbox"/>	--	--	--	--	--	1 witness	<input checked="" type="checkbox"/>	--	--
Wyoming	--	<input checked="" type="checkbox"/>	--	--	--	<input checked="" type="checkbox"/>	--	--	<input checked="" type="checkbox"/>	--	--

Notes on FWAB State Instructions

Alaska: (Block 9) If the voter is using the FWAB to register to vote, they must enclose proof of Alaska residency (such as a copy of a current Alaska Driver's License or a leave and earning statement reflecting Alaska as place of residency) with this application.

Arizona: (Block 9) If the voter is using this form to register to vote, they must enclose proof of citizenship with this application. The voter must include a photocopy, not the original documents. **(FWAB Submission)** To use the online system, the voter must have received instructions from their election official, they cannot email your FWAB.

California: (Block 6) Voters who do not provide a political party affiliation can vote in a presidential primary election if the political party allows it, more information about this can be found at <http://www.sos.ca.gov>. Political party affiliation is not required if requesting an absentee ballot for other primary elections or general elections. **(FWAB Submission)** The FWAB can be faxed only if the voter is a Uniformed Service member or eligible family member overseas.

Florida: (FWAB submission) Voters may fax the FWAB only if they are outside of the U.S.

Hawaii: (FWAB submission) The FWAB can be faxed only if the voter requested their absentee ballot by fax within five days of the election

Missouri: (FWAB submission) The FWAB can be emailed or faxed only if the voter is located in a hostile fire zone.

New York: (Block 1) The voter cannot register and vote at the same time using the FWAB. If the voter is not registered, the FWAB will register them for future elections. **(Block 4)** The State issued ID must be from the Department of Motor Vehicles.

Oregon: (Block 4) The voter must provide a State issued ID number. If the voter does not have a State issued ID number, they may provide the last four digits of their social security number. **(Block 6)** To vote in a primary election for a major party, you

must enter the name of the party ballot you want to receive. If you do not indicate a political party, you will receive a nonpartisan ballot. Political party affiliation is not required if requesting an absentee ballot for general elections.

Puerto Rico: (Block 9) The voter must provide their father's and mother's first name.

Pennsylvania: (Block 1) Only Uniformed Service members and their eligible family members can use the FWAB for registration.

South Dakota: (Block 9) Stateside Uniformed Service members and their eligible family members must provide a photocopy of a valid form of personal ID with your picture: (1) A State issued ID card; (2) A passport or government issued ID card; (3) A tribal ID card; or (4) A current student identification card. If they cannot provide a copy of your ID, then the FPCA must be notarized.

Texas: (FWAB submission) The FWAB can be faxed only if the voter is located in a hostile fire zone.

Vermont: (Block 9) If the voter has never registered before in Vermont, they must take a self-administered oath or it may be administered by anyone over the age of 18. The Vermont voter's oath is: *"You solemnly swear (or affirm) that whenever you give your vote or suffrage, touching any matter that concerns the State of Vermont, you will do it so as in your conscience you shall judge will most conduce to the best good of the same, as established by the Constitution, without fear or favor of any persons."* You or the person who administered the oath must write ONE of the following and sign (as applicable). *"On the __ day of __, 20__, I swore or affirmed the Vermont Voter's oath." OR "I administered the oath to the voter."*

Virginia: (Block 9) Overseas citizen voters must provide the name of their employer or the name of their spouses or dependent's employer. If they do not provide this, they receive a ballot for federal offices only.

Information retrieved from the online Voting Assistance Guide (updated September 2014). For complete State instructions go to: FVAP.gov

