

ELECTOR'S VOTING RECORD

NAME OF ELECTOR (PRINT OR TYPE)		AGE	
MR. <i>Smith</i> LAST	<i>John Doe</i> FIRST MIDDLE	45	
RESIDENCE ADDRESS		DATE OF BIRTH	
<i>101 Anywhere St</i>		<i>01/01/1960</i>	
MAILING ADDRESS IF DIFFERENT FROM ABOVE		SOC. SEC. NUMBER	
		<i>-4111</i>	
STREET OR P.O. BOX NUMBER		CITY STATE ZIP	
<i>101 Anywhere St</i>		<i>Anywhere ID</i>	
RESIDED IN IDAHO		PREVIOUSLY REGISTERED - FILL IN WHERE	
<input checked="" type="checkbox"/> YES		<input type="checkbox"/> NO	
1 YEAR 3 MONTHS		CLARENCE A PLANTING	
I DECLARE UNDER OATH OR AFFIRMATION THAT THE INFORMATION SUPPLIED HEREIN IS TRUE.		SUBSCRIBED AND SWORN TO (OR AFFIRMED) THIS	
<i>John D. Smith</i> SIGNATURE OF ELECTOR		<i>27</i> DAY OF <i>Oct</i> 19 <i>76</i>	
PRECINCT NAME OR NUMBER		CATEGORY OF ELECTOR	
<i>8</i>		18-YR.-OLD REG. <input type="checkbox"/>	
SEC., TWP., AND RANGE, OR INFORMATION LOCATING RES.		PRES. ELECTOR REG. <input type="checkbox"/>	
		REGULAR REGISTRATION <input checked="" type="checkbox"/>	

EXAMPLE

010000390



John Doe Smith