

Paid for by Republican Party of Pennsylvania  
112 State Street  
Harrisburg, PA 17101  
[www.pagop.org](http://www.pagop.org)

18AC-05

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**PAID**  
Republican Party  
of Pennsylvania

# IS THIS WHAT YOU SIGNED UP FOR?

☒ Antifa ☒ Socialism ☒ Trillions in New Taxes ☒ Complete Government Control



**IT'S TIME TO #WalkAway. SEE HOW↓**



# You aren't leaving the Democrat Party. The Democrat Party left you.

## #WalkAway



- **#WalkAway** from the new Democrat Party who would replace capitalism with Socialist policies that require trillions in new taxes.

- **#WalkAway** from the violent and destructive tactics of the Democrat Party's militant-arm, Antifa.



- **#WalkAway** from extreme Democrat candidates who have hijacked your party, and abandon the individual freedoms protected by our constitution.



- The Democratic party has embraced candidates for office that support policies which would require massive tax increases on working families including increases in sales and income taxes.

**IT'S TIME TO SEND A MESSAGE, REGISTER REPUBLICAN TODAY!**

*Please complete the enclosed voter registration form  
or register online at [www.VotesPA.com](http://www.VotesPA.com)*

*Deadline to change for this election is October 6th!*

For more information, please visit: [www.PAGOP.org](http://www.PAGOP.org) or  **PAGOP**



# Pennsylvania Voter Registration Application

Use blue or black ink

<b>Print your name</b>	1	Last name		Jr Sr II III IV (circle if applicable)
		First name		Middle name or initial
<b>Eligibility</b> If you answer "No" to either question, you cannot register to vote.	2	Are you a citizen of the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No		
		Will you be 18 years or older on or before election day? <input type="checkbox"/> Yes <input type="checkbox"/> No		
<b>Reason</b>	3	<input type="checkbox"/> New registration <input type="checkbox"/> Change of name <input type="checkbox"/> Change of address <input type="checkbox"/> Change of party <input type="checkbox"/> Federal or State employee registering in county of last residence		
<b>About you</b> Phone and email are optional and used if information is missing on this form.	4	Birth date M M / D D / Y Y Y Y		Sex <input type="checkbox"/> M <input type="checkbox"/> F Race (optional)
		Phone - - - - -		Email
<b>Your address</b> If you do not have a street address or a permanent residence, or are a student, see the instructions.	5	Address (not P.O. Box)		Apt. number
		City/Town		State PA Zip Code - - - - -
		Municipality		County
		<input type="checkbox"/> I do not have a street address or permanent residence (use map on back)		
<b>The address where you receive mail</b>	6	<input type="checkbox"/> Same as above Address or P.O. Box		
		City/Town State - - Zip Code - - - - -		
<b>Identification</b> If you have a PennDOT number you must use it. If not please provide the last four digits of your Social Security number. See <i>Verifying your identity</i> .	7	PennDOT driver's license or ID card number - - - - -		
		Last four digits of your Social Security number X X X - X X - - - - -		
		<input type="checkbox"/> I do not have a Pennsylvania driver's license or a Social Security number		
<b>Political party</b> To vote in a primary, you must register with either the Democratic or Republican party.	8	<input type="checkbox"/> Democratic <input type="checkbox"/> Republican <input type="checkbox"/> Other: <input type="checkbox"/> None		
<b>Voting assistance</b>	9	<input type="checkbox"/> I require help to vote. I need this kind of assistance My preferred language		
<b>If your name or address has changed</b> Skip if this is the first time you are registering to vote.	10	Name on previous registration		
		Full previous address and county		
		PA Voter No. (if available) - - - - - Year - - - - -		
<b>Declaration</b>	11	<b>I declare that</b> <ul style="list-style-type: none"><li>I am a United States citizen and will have been a citizen for at least 1 month on the day of the next election.</li><li>I will be at least 18 years old on the day of the next election.</li><li>I will have lived at the address in Section 5 for at least 30 days before the election.</li><li>I am legally qualified to vote.</li></ul> I affirm that this information is true. I understand that this declaration is the same as an affidavit, and, if this information is not true, I can be convicted of perjury, and fined up to \$15,000, jailed for up to 7 years, or both.		<b>Signature or mark</b>  <b>Print your name</b>  <b>Today's date</b> M M / D D / Y Y Y Y
<b>Help with this form</b> Fill in if someone helped you with this form or witnessed you make a mark for your signature.	12	Name of assistant		
		Address		
		Phone Signature of assistant		

Your address

PLACE  
FIRST-CLASS  
STAMP  
HERE



Chester County Voter Services  
601 Westtown Road, Suite 150  
PO Box 2747  
West Chester, PA 19380-0990

FOLD HERE

Fold, tape shut, and mail to your  
County Voter Registration Office.

Do not use staples.

County Voter Registration Office addresses  
are listed on page 2.

TAPE HERE

TAPE HERE

TAPE HERE