

Polling Place Elector Identification Form

This form is permitted to be used by an elector at the polling place as a government document when the information provided is validated through the statewide voter registration system by an election official. (Ref. ARM 44.3.2102)

SECTION 1: ELECTOR INFORMATION (to be completed by Elector)

Name (please print legibly): Former name(s), if applicable: Date of Birth:				
			urrent Montana Residential Address:	
		Current Mailing Address:		
Current Mailing Address: Driver's License Number, Montana State Identification Number; or Last Four Digits of your Social Security Number: Signature of Elector Date Note: If you do not have all the required information to complete Section 1, you may return to the polling place with an acceptable form of identification or cast a provisional ballot.				
Signature of Elector	Date			
SECTION 2: VERIFICATION (to be compl	leted by Polling Place Election Official)			
Instructions: Contact the County Election Office to Complete Section 2. Retain a copy of the completed	validate the information provided by the Elector in Section 1. d form.			
Name of County Election Official contacted:				
County:				
Validated (time/date)				
Not Validated (time/date)				
Printed Name of Polling Place Election Official: _				
Signature of Polling Place Election Official:				

Note: If the information provided by the Elector is validated, this completed form can be used as a government document for purposes of voting. A government document presented along with a photo ID which contains the individual's name is one option for meeting the identification requirements for in-person voting. See 13-13-114, MCA or https://sosmt.gov/voter-id for more information.