

CHANGE OF ADDRESS

(please type or print legibly - information **must** be complete and accurate)

Name (first, middle, last)			Date of Birth	Sex <input type="checkbox"/> M <input type="checkbox"/> F	Driver's License No. or I.D. No.
New Resident Address			New Mailing Address (if different from resident address)		
City	State	ZIP Code	City	State	ZIP Code
County			County		
Former Resident Address			Former Mailing Address (if different from former resident address)		
City	State	ZIP Code	City	State	ZIP Code
I swear and affirm, under penalty of perjury that the above information is true and correct.			FOR VOTER REGISTRATION		
Applicant's Signature			Is the above change of address also for voter registration purposes? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Date			U.S. Citizen by: <input type="checkbox"/> Birth <input type="checkbox"/> Naturalization Party Affiliation <input type="checkbox"/> Republican <input type="checkbox"/> Democrat <input type="checkbox"/> Unaffiliated <input type="checkbox"/> Political Organization _____		
1. Please print legibly, your new address on the back of your license in the designated area. 2. Place a stamp on this card and mail, or 3. Deposit in Address Change Drop Box at your nearest Driver's License Office.			I, _____, do solemnly swear (or affirm) that I am a citizen of the United States and that on the date of the next election I shall have attained the age of eighteen years, and shall have resided in the state of Colorado at least 30 days and in my precinct at least 30 days before the election. I further swear (or affirm) that the present address I listed herein is my sole legal place of residence and that I claim no other place as my legal residence.		
			Voter Registration Applicant Signature		Date
			SSN (optional)		Phone No. (optional)



RETURN FORM TO:

Colorado Motor Vehicle Division
Traffic Records Section Room 164
Denver CO 80261-0016



1/27/00, 10:18 AM



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