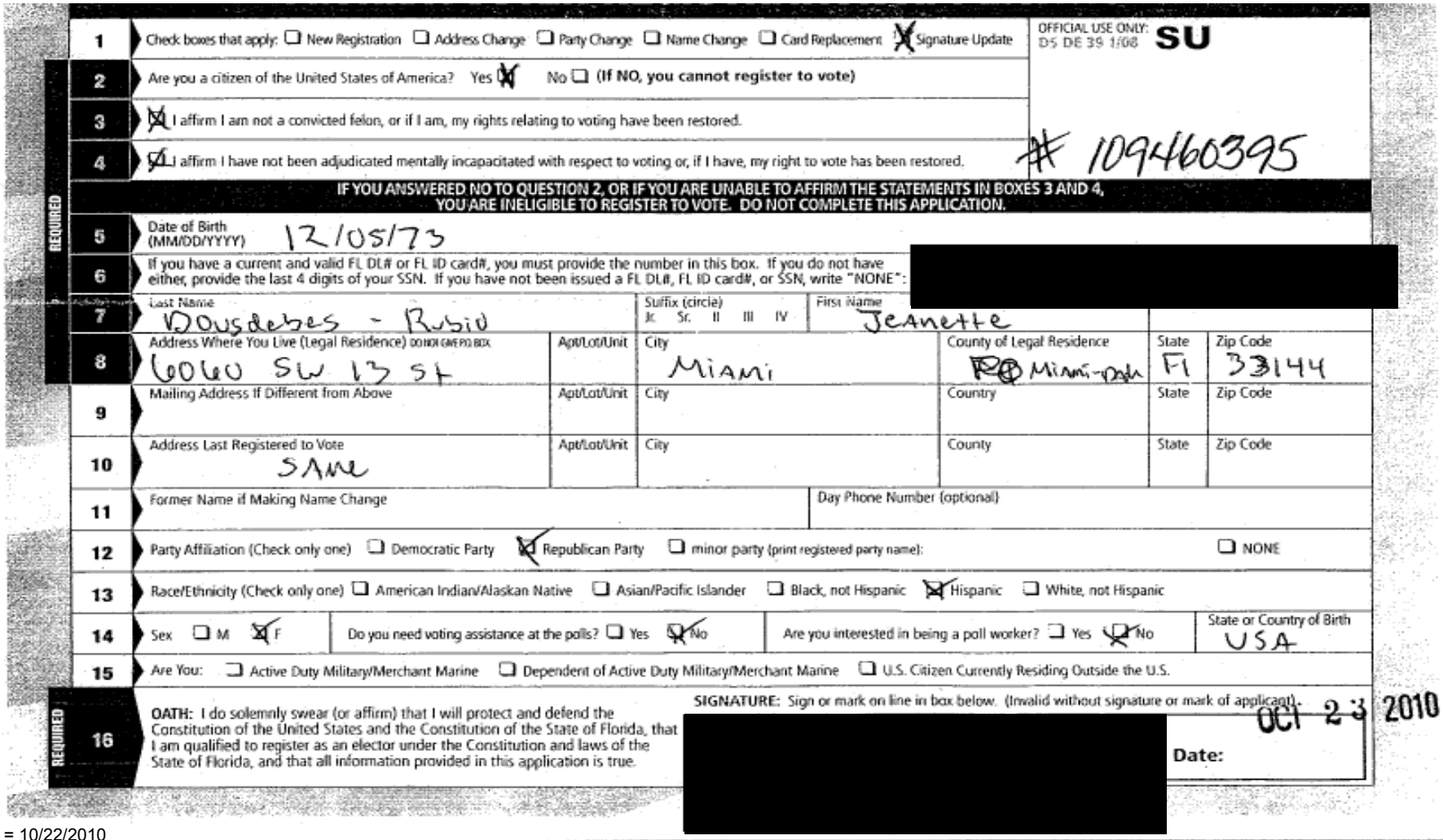
109460395, Dousdebes-Rubio, Jeanette (Doc Images)

DAD 109460395 Dousdebes-Rubio, Jeanette 6060 SW 13Th St, West Miami, 33144



1 Check boxes that apply: ☐ New Registration ☐ Address Change ☐ Party Change ☐ Name Change ☐ Card Replacement ☒ Signature Update

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2 Are you a citizen of the United States of America? Yes ☒ No ☐ **(If NO, you cannot register to vote)**

3 ☒ I affirm I am not a convicted felon, or if I am, my rights relating to voting have been restored.

4 ☒ I affirm I have not been adjudicated mentally incapacitated with respect to voting or, if I have, my right to vote has been restored.

109460395

IF YOU ANSWERED NO TO QUESTION 2, OR IF YOU ARE UNABLE TO AFFIRM THE STATEMENTS IN BOXES 3 AND 4, YOU ARE INELIGIBLE TO REGISTER TO VOTE. DO NOT COMPLETE THIS APPLICATION.

REQUIRED

5 Date of Birth (MM/DD/YYYY) 12/05/73

6 If you have a current and valid FL DL# or FL ID card#, you must provide the number in this box. If you do not have either, provide the last 4 digits of your SSN. If you have not been issued a FL DL#, FL ID card#, or SSN, write "NONE": [redacted]

	Last Name	Suffix (circle) Jr. Sr. II III IV	First Name
7	Dousdebes - Rubio		Jeanette

	Address Where You Live (Legal Residence) DO NOT GIVE PO BOX	Apt/Lot/Unit	City	County of Legal Residence	State	Zip Code
8	6060 SW 13 St		Miami	RO Miami-Dade	FL	33144
9	Mailing Address If Different from Above	Apt/Lot/Unit	City	Country	State	Zip Code
10	Address Last Registered to Vote SAME	Apt/Lot/Unit	City	County	State	Zip Code

11 Former Name if Making Name Change | Day Phone Number (optional)

12 Party Affiliation (Check only one) ☐ Democratic Party ☒ Republican Party ☐ minor party (print registered party name): ☐ NONE

13 Race/Ethnicity (Check only one) ☐ American Indian/Alaskan Native ☐ Asian/Pacific Islander ☐ Black, not Hispanic ☒ Hispanic ☐ White, not Hispanic

14 Sex ☐ M ☒ F | Do you need voting assistance at the polls? ☐ Yes ☒ No | Are you interested in being a poll worker? ☐ Yes ☒ No | State or Country of Birth USA

15 Are You: ☐ Active Duty Military/Merchant Marine ☐ Dependent of Active Duty Military/Merchant Marine ☐ U.S. Citizen Currently Residing Outside the U.S.

REQUIRED

16 **OATH:** I do solemnly swear (or affirm) that I will protect and defend the Constitution of the United States and the Constitution of the State of Florida, that I am qualified to register as an elector under the Constitution and laws of the State of Florida, and that all information provided in this application is true.

SIGNATURE: Sign or mark on line in box below. (Invalid without signature or mark of applicant). [redacted] **Date:** OCT 23 2010

Image 10/22/

Scan Date = 10/22/2010

VR Systems Voter Focus Version 14.3.5(0)
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Operator = MGILES