



Pokégnek Bodéwadmik · Pokagon Band of Potawatomi

Election Board

Box 696 • 58620 Sink Road • Dowagiac, MI 49047 • www.PokagonBand-nsn.gov
(269) 782-9475 • (888) 782-9475 toll free • (269) 462-4308 fax

Official Voter Registration Form

You must be an enrolled Band Citizen and be at least fifty-five (55) years of age on November 2, 2019 to be eligible to vote. Eligible voters must have registered to vote before 4:30 P.M. on October 3, 2019 to be able to vote in the November 2, 2019 Elders Council Election.

If you have been a registered voter in past elections and you have not legally changed your name since registering to vote, then you are already registered to vote in the upcoming November 2, 2019 Elders Council Election. If you have never been a registered voter or if you have legally changed your name since registering to vote, you will need to re-register by completing this Official Voter Registration Form and returning it to the Election Board Office at the address listed below. Late or incomplete Voter Registration Forms will not be accepted and will result in your not being eligible to vote in the upcoming 2019 Elders Election.

If you are unsure of your voter registration status, have questions about this form, or any other questions about voting, do not hesitate to call the Election Board Office.

1. Please check the box or boxes stating the reason you are submitting this form.

- I am submitting this form because I am not registered to vote.
- I am submitting this form because I legally changed my name after previously registering.

Please print your former name: _____

2. Please list your tribal enrollment number here: _____

3. Please list your current **physical** address here: _____
STREET ADDRESS

CITY STATE ZIP

4. Please list your current **mailing** address and telephone number here: _____
STREET ADDRESS

CITY STATE ZIP PHONE

5. Please clearly print your full name, date of birth and age. Then sign and date this voter eligibility certification statement.

I, _____ hereby certify that I am a
(PRINT NAME)

Citizen of the Pokagon Band of Potawatomi Indians and that I will be at least fifty-five (55) years of age on November 2, 2019.

Date of Birth and Age: _____

Signature: _____ Date: _____

Return this form by **mail**:
Pokagon Band Election Board
P.O. Box 696
Dowagiac, MI 49047
Fax (269) 462-4308
Email: election.board@pokagonband-nsn.gov

OR
hand delivery:
Pokagon Band Election Board Office
58620 Sink Road
Dowagiac, MI 49047

Election Board Use Only	
Date/manner voter registration form received: _____	
Voter registration form received by: _____	
Tribal citizen age and enrollment number verified: _____	
ENROLLMENT DEPARTMENT/DATE _____	

A proud, compassionate people committed to strengthening our sovereign nation.

A progressive community focused on culture and the most innovative opportunities for all of our citizens.