

Federal Write-In Absentee Ballot (FWAB) Reference for State Instructions

State	Voter Registration (Block 1)	Race (Block 4)	Identification (Block 4)							Political Party (Block 6)	Additional Requirements (Block 9)	Witness Signature (Affirmation)	Accepted FWAB Submission Modes				
	<i>Voters from these States may use the FWAB for voter registration.</i>	<i>These States request that voters provide their race/ethnicity.</i>	<i>Most States require one or more of the following for voter identification:</i>							<i>Voters from these States must indicate a political party to vote in that party's primary election</i>	<i>Voters from these States are required to provide additional information in Block 9.</i>	<i>Voters from these States are required to have a witness(es) sign and date their FWAB.</i>	Mail	Fax (*indicates FWAB must also be mailed)	Email (*indicates FWAB must also be mailed)	Online	
			Date of Birth	Driver's License #	Last 4 digits of SSN	Full SSN	State ID Number	Voter Registration #	Other Identification								
Alabama		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>											<input checked="" type="checkbox"/>			
Alaska	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	See Note	Two witnesses (18 years or +) One witness	<input checked="" type="checkbox"/>	See Note			
American Samoa			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>				
Arizona	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	See Note		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Arkansas		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>										<input checked="" type="checkbox"/>				
California	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>	See Note			
Colorado	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>				See Note	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Connecticut			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>				
Delaware	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
District of Columbia	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Florida		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>										<input checked="" type="checkbox"/>	See Note			
Georgia	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>				
Guam		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>				
Hawaii	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			
Idaho			<input checked="" type="checkbox"/>							<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	See Note			
Illinois			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>				
Indiana					See Note								<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Iowa	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	See Note			
Kansas			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Kentucky	See Note		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>				
Louisiana			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>	See Note			
Maine	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Maryland	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Massachusetts			<input checked="" type="checkbox"/>							<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Michigan			<input checked="" type="checkbox"/>										<input checked="" type="checkbox"/>				
Minnesota			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		See Note				<input checked="" type="checkbox"/>				
Mississippi	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Missouri	See Note		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	See Note			
Montana	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>								<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Nebraska	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					See Note			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Nevada	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		See Note	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
New Hampshire			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>				
New Jersey			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
New Mexico			<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
New York	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	See Note		<input checked="" type="checkbox"/>				
North Carolina	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
North Dakota			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Ohio	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>				
Oklahoma	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			
Oregon	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Pennsylvania	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>				
Puerto Rico			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>			See Note	See Note	<input checked="" type="checkbox"/>				
Rhode Island			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	See Note			
South Carolina	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
South Dakota	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>										<input checked="" type="checkbox"/>				
Tennessee	See Note	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>		See Note	<input checked="" type="checkbox"/>				
Texas			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>	See Note			
Utah	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	See Note			
Vermont			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					See Note			<input checked="" type="checkbox"/>				
Virgin Islands	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			
Virginia	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>	See Note	One witness (18 years or +)	<input checked="" type="checkbox"/>				
Washington	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
West Virginia			<input checked="" type="checkbox"/>							<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Wisconsin			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>					One witness	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Wyoming			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>				

Block numbers refer to the 2013 version of the FWAB. Information retrieved from the Voting Assistance Guide (last updated September 2013).
For complete State instructions go to: FVAP.gov

Alaska: When initially registering to vote by mail from outside Alaska, you must enclose proof of Alaska residency (such as a copy of a current Alaska Driver's License or a leave and earning statement reflecting Alaska as place of residency) with this application. Alternatively, if you are an overseas citizen, and were last domiciled in Alaska prior to leaving the U.S. and do not intend to return to Alaska as a resident you may register as a "Federal Voter" and participate in only elections for Federal office. To request this option, write: "I wish to register as a Federal voter and was last domiciled in Alaska prior to leaving the U.S." You must provide a copy of your valid passport, card of identity and registration, or other identification issued under the authority of the U.S. Secretary of State with this application. This is not required for Uniformed Service members and their families. You may submit the FWAB by fax only if you requested on your application to have your ballot faxed to you.

Arizona: If you are not registered to vote in Arizona, or if you are registered and move to a different Arizona County, you must provide one of the following for proof of citizenship or your FWAB will be rejected: AZ driver's license number or non-operating identification license number issued after October 1, 1996; Alien registration number from certificate of naturalization (enter in Block 9); Indian census number, Bureau of Indian affairs card number, Tribal Treaty Card number, or Tribal Enrollment number (enter in Block 9); A legible photocopy of a birth certificate that verifies citizenship and supporting legal documentation (i.e., marriage certificate) if the name on the birth certificate is not the same as your current legal name; A legible photocopy of pertinent pages of a U.S. passport identifying the applicant; a legible photocopy of a Driver's License or Non-Operating License from another State within the U.S. if the license indicates proof of citizenship; a legible photocopy of Tribal Certificate of Indian Blood or Tribal/Bureau of Indian Affairs Affidavit of birth.

California: If you are a Uniformed Service member, an eligible family member or a citizen outside the U.S. temporarily, you may choose to fax your FWAB.

Colorado: You may also use your Colorado Department of Revenue ID number.

Florida: You may submit the FWAB by mail or fax if you are an overseas Uniformed Service member, eligible family member, or overseas citizen. If you are an absent Stateside Uniformed Service member or eligible family member, you must submit your FWAB by mail.

Idaho: Idaho does not allow FWABs to be returned by email or fax unless a special declaration is made by the Secretary of State before the election. Refer to www.idahovotes.gov to see if a declaration has been made.

Indiana: Recommended but not required to provide valid Indiana Driver's License number or last four numbers of Social Security number.

Kentucky: After July 1, 2014 the FWAB may be used for registration if submitted by the registration deadline.

Louisiana: If you feel you will not have time to vote in a timely manner, please contact your local registrar for additional fax or emergency options.

Iowa: Only uniformed service members eligible for imminent danger pay may return the FWAB by email or fax.

Minnesota: Passport number is an acceptable identification number. If you do not have access to any of these numbers leave this Block 4 blank.

Missouri: (Block 1) Beginning July 1, 2014, Missouri allows you to register to vote by checking this block. (Block 6) If you do not enter a preference, the local election official is authorized to provide that part of the ballot for which political party designation is not required. (Submission) Missouri does not allow FWABs to be returned by email or fax unless a special declaration is made by the Secretary of State before the election or if you are using the FWAB for registration only. Refer to www.sos.mo.gov to see if a declaration has been made.

Nebraska: If you are using this form to register political affiliation is not necessary to vote in primaries. Registered non-partisan voters can vote a non-partisan ballot, or they may request a non-partisan Republican ballot or a non-partisan Democrat ballot.

Nevada: If you do not possess any of these identification numbers, contact your local election official to be assigned a unique identification number.

New Mexico: Your full Social Security number is required.

New York: New York allows you to receive your absentee ballot by mail, email, or fax. Identify how you would like to receive your absentee ballot (Block 9).

Puerto Rico: Both your paternal and maternal surnames are required (Block 3). Otherwise, provide your full name as it appears on file at the Puerto Rico State Elections Commission. Provide your father's and mother's first names (Block 9). Certifying officer who signs the affirmation must state in Block 9: "I certify that [voter] is a [member of the U.S. Army, student at XX University, etc., whichever is applicable]."

Rhode Island: You may submit the FWAB by fax if you faxed your FPCA for ballot request.

Tennessee: (Block 1) The FWAB can be used as a temporary registration tool. (Affirmation) If you required assistance completing your FWAB, one person must witness and sign.

Texas: If you are casting the ballot from an area where you are eligible to receive hostile fire pay or imminent danger pay, or that has been designated a combat zone by the President, you may return your ballot by fax.

Utah: If you submit your FWAB by fax or email you must affirm in writing on the fax/email coversheet, "I understand that by electronically transmitting my voted ballot I am voluntarily waiving my right to a secret ballot."

Vermont: Enter your political party affiliation for voting in Presidential Primary elections or write none if you wish to only vote in State primaries and general elections.

Virginia: In Block 9, you must provide your complete Virginia residence address where you last registered and voted if applicable. Uniformed Service members and their eligible family members must provide the branch of Service of the member. Overseas citizens, who are employed overseas (accompanying eligible family members) should provide the name and address of their employer (if applicable). Virginia registrants who move overseas for employment may be eligible to vote in State and local elections. Enter the last day of residency at your Virginia voting residence only if you have given up that address permanently or have no intent to return.

