



**AFFIDAVIT OF A CHALLENGED VOTER**

*INSTRUCTIONS: When completed, put this form in the PRE-13 Envelope for Affidavits.*

STATE OF INDIANA

COUNTY OF \_\_\_\_\_

**GENERAL INFORMATION**

I, the undersigned, state the following:

- 1. that I am duly registered and a qualified voter of this precinct *(or I have executed a Request for Transfer Affidavit (VRG-4/12 form) under IC 3-10-11 or IC 3-10-12)*
- 2. that my present residence address is \_\_\_\_\_
- 3. that either:
  - A. At the last general election, I voted for a majority of the regular nominees of the *(check one)*
    - Democratic Party **OR**  Republican Party at the next election; **OR**
  - B. I did not vote at the last general election, but I intend to vote at the next election for a majority of the regular nominees of the *(check one)*
    - Democratic Party **OR**  Republican Party.

**CHALLENGED VOTER AFFIRMATION**

I swear *(or affirm)* that the foregoing statements are true, to the best of my knowledge and belief, and understand that making a false statement on this affidavit is punishable under the penalties of perjury.

Signature of Challenged Voter		Printed Name	
Precinct	Township or Ward	City or Town	

STATE OF \_\_\_\_\_ )  
 ) SS:  
 COUNTY OF \_\_\_\_\_ )

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Signature of Notary Public or Other Official Administering Oath

\_\_\_\_\_  
Printed Name and Title

My Commission expires *(applies only to Notary Public)*: \_\_\_\_\_ County of Residence: \_\_\_\_\_