 Continue below to complete application. 	204/3830	
Last Name First Name	Middle Name (if any) Form	er Name
Bryant Freddie	Ray	
Residence Address: Street Address and Apartment Numb (Do not include P.O. Box or Rural Rt.)	er, City, State, and ZIP. If none, describe	where you live.
118 Peranwood north	Kyle TX 786	40
Mailing Address: Address, City, State and ZIP: If mail cannot	t be delivered to your residence address.	
_ Same as about		
Date of Birth: month, day, year Gender (Optional)	I understand that giving false informs voter registration is perjury, and a cr federal law. I affirm that I	
TX Driver's License No. or Personal I.D. No. (Issued by the Department of Public Safety) If none, give last 4 digits of your Social Security Number	am a resident of this county; have not been finally convicted of a I have completed all of my punishmeterm of incarceration, parole, super	ent including any vision, period of
☐ Check if you do not have a Social Security, driver's license, or personal identification number	 probation, or I have been pardoned have not been declared mentally includenent of a court of law. 	
Telephone Number - Include Area Code (Optional)	10	104104 Date
City and County of Former Residence In Texas	X Signature of Applicant or Agent and Rela or Printed Name of Applicant if Signed	ationship to Applicant by Witness and Date.
Texas Voter Registration Application Please complete sections by printing legibly. If you have any questions about how to fill out this application, please cell the Secretary of State's Office toll-free at 1-800-252-VOTE (8683), TDD 1-800-735-2989. You must register to vote in the county in which you reside	be used only for voter registration pur You must provide your driver's licens cation number. If you do not have a d sonal identification, then give the last cial security number. If you do not hav tification numbers, then you must ind	pases. e or personal identifi- triver's license or per- four digits of your so- e either of these iden-



