

Public Service Center Building
240 N. Stone Ave., First floor
Tucson, AZ 85701

Document Recording: (520) 724-4350
Voter Registration: (520) 724-4330



Mailing Address:
PO Box 3145
Tucson, AZ 85702-3145

Social: @PimaRecorder
Web: recorder.pima.gov

Gabriella Cázares-Kelly, Recorder

New Citizen Voter Registration Instructions

Congratulations on becoming a United States citizen!

You are now eligible to participate in your most fundamental right – the right to vote! Voting is the foundation of our democracy. Your vote in federal, state and local elections significantly impacts our day-to-day lives, and your perspective matters.

Our office manages your Voter Record and administers Early Voting.

Ways to register:

- If you have a Driver's License Number and Naturalization Certificate Number (A00000000), submit a completed form:
 - By mail or in person to the Pima County Recorder's Office.
 - In person at the Motor Vehicle Division (MVD) with your Citizenship Certificate.
 - Note: To register/update online at [AZMVDNow.gov](https://www.azmvdnow.gov), you must first present your Citizenship Certificate to the MVD in person, otherwise your Voter Registration will not be processed.
- If you do not have an Arizona driver's license, submit Proof of Residency in person at the Recorder's Office or by emailing VoterDocs@recorder.pima.gov. A copy of a utility bill or bank statement with your address is sufficient. Visit our website for more options.

Get connected and vote!

- **Sign up** to receive text/email alerts of any Voter Registration record changes and updates to your Early Ballot tracking: recorder.pima.gov/AlertMe
- **Follow us** on social media: @pimarecorder

Voting is the foundation of our democracy. Stay educated, informed, and VOTE!

Resources

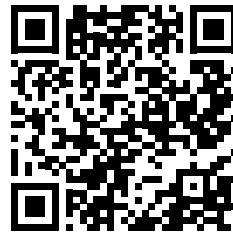


[recorder.pima.gov
/Register](https://recorder.pima.gov/Register)

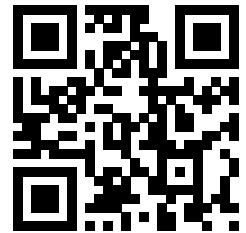


[recorder.pima.gov
/NewCitizen](https://recorder.pima.gov/NewCitizen)

(translate this document/
traducir este documento)



[recorder.pima.gov
/AlertMe](https://recorder.pima.gov/AlertMe)



[AZMVDNow.gov](https://www.azmvdnow.gov)

Last updated: March 31, 2025

How to complete the form as a Naturalized Citizen

1. Fill out the Voter Registration form with **blue** or **black** ink.
2. Once you're finished, tear the back page off for your records.
3. The top page can be mailed in, or you can drop it off at the Recorder's Office.
4. Present your citizenship certificate in person OR email it to VoterDocs@recorder.pima.gov
5. Once the form is processed, you will receive a Voter ID card in the mail in approximately 30 days.

ARIZONA VOTER REGISTRATION FORM FORMULARIO DE REGISTRO ELECTORAL EN ARIZONA

FILL OUT COMPLETELY WITH A BLACK/BLUE PEN (RED SHADED BOXES ARE REQUIRED). TO BE ELIGIBLE TO VOTE A "FULL BALLOT," COMPLETE BOX 9, 10 OR 11 OR PROVIDE OTHER PROOF OF CITIZENSHIP - SEE BACK FOR DETAILS AND ADDITIONAL INSTRUCTIONS. LLENE COMPLETAMENTE CON PLUMA DE TINTA NEGRA/AZUL (LAS CASILLAS ROJAS SON REQUERIDAS). PARA VOTAR EN UNA "BOLETA ELECTORAL COMPLETA" LLENE LA CASILLA 9, 10 U 11 O INCLUYA OTRA PRUEBA DE CIUDADANIA - VEA LOS DETALLES EN EL REVERSO.

1 Active Early Voting List (AEVL) / Lista Activa de Votación Temprana Receive your early ballot by mail! / ¡Reciba su boleta de votación temprana por correo! <input type="checkbox"/> Yes , I want to be added to AEVL and automatically get an early ballot by mail for every election for which I am eligible. (To be on AEVL, your mailing address in Box 7 must be in Arizona.) Si Quiero que me agreguen a la lista AEVL y recibir automáticamente una boleta de votación temprana por correo para cada elección. (Para estar en la lista AEVL, su dirección postal en la Casilla 7 debe estar en Arizona.) <input type="checkbox"/> No , I do not want to be added to AEVL. I understand CHECKING THIS BOX will remove my name from AEVL if it was previously included. / No. No quiero que me agreguen a la lista AEVL. Yo entiendo que al MARCAR ESTA CASILLA removerán mi nombre de la lista AEVL si éste estaba incluido antes.		REGISTER ONLINE / REGISTRESE EN LINEA: WWW.SERVICEARIZONA.COM FOR MORE INFORMATION / PARA MÁS INFORMACIÓN: WWW.AZSOS.GOV 1-877-THE-VOTE	
2 Last Name / Apellido First Name / Nombre Middle Name / Segundo Nombre		3 Residential Address (where you live - no P.O. Box/business address) / Domicilio Residencial (donde usted vive - no use un apartado postal ni dirección comercial) If no street address, describe location using mileage, cross streets, parcel #, subdivision name/lot, or landmarks. Draw a map and/or provide latitude/longitude or geocode in Box 23 if located in a rural area without a traditional street address. / Si no cuenta con un domicilio de calle, describa la ubicación usando millaje, cruces de calles, núm. de parcela, nombre de lote/subdivisión, o detalles específicos de referencia. Dibuje un mapa y/o provea la latitud/longitud o código geográfico en la casilla 23 si está ubicado en un área rural sin domicilio tradicional de calles.	
4 Apt./Unit/Space Apto/Unidad/Espacio		5 City / Ciudad	
6 Zip / Código Postal		7 Mailing Address (where you get mail, if not delivered to residential address) / Dirección Postal (donde usted recibe su correo, si su correo no es entregado a su domicilio residencial)	
8 Last 4 Digits of Social Security # Últimos 4 Dígitos del Núm. de Seguro Social		9 AZ Driver License or Nonoperating License # / Núm. de Licencia de Manejo o Tarjeta de Identificación de Arizona	
10 Birth Date (MM/DD/YYYY) Fecha de Nacimiento (MM/DD/AAAA)		11 Tribal ID # Núm. de Identificación Tribal	
12 State or Country of Birth Estado o País de Nacimiento		13 Occupation / Ocupación	
14 Party Preference Preferencia de Partido <input type="checkbox"/> Republican / Republicano <input type="checkbox"/> Democratic / Democrático <input type="checkbox"/> Other / Otro <input type="checkbox"/> None or No Party / Ningún Partido		15 Telephone Number Número de Teléfono Is this a cellphone? <input type="checkbox"/> Yes/Sí <input type="checkbox"/> No ¿Es éste número de un teléfono celular?	
16 Former Name(s) (if applicable) Nombre/s Previo/s (si es aplicable)		17 E-Mail / Correo Electrónico	
18 Father's Name or Mother's Maiden Name Nombre de su padre/nombre de soltera de su madre		19 Are you willing to work at a polling place on Election Day? ¿Está dispuesto/a a trabajar en un lugar de votación el Día de la Elección? <input type="checkbox"/> Yes/Sí <input type="checkbox"/> No	
20 Are you a citizen of the United States of America? ¿Es usted ciudadano/a de los Estados Unidos de América? <input type="checkbox"/> Yes/Sí <input type="checkbox"/> No If you checked "No" to either of these questions, DO NOT submit this form. Si usted marcó "No" a cualquiera de estas preguntas, NO presente este formulario.		21 Will you be at least 18 years old by Election Day? ¿Cumplirá usted 18 años de edad en o antes del Día de la Elección? <input type="checkbox"/> Yes/Sí <input type="checkbox"/> No If you checked "No" to either of these questions, DO NOT submit this form. Si usted marcó "No" a cualquiera de estas preguntas, NO presente este formulario.	
22 VOTER DECLARATION - By signing below, I swear or affirm that the above information is true, that I am a RESIDENT of Arizona, I have NOT been convicted of a FELONY (or my civil rights have been restored - see back for details), and I have NOT been adjudicated INCAPACITATED by my voting rights revoked. DECLARACIÓN DEL/LA VOTANTE - Al firmar abajo, yo juro o afirmo que la información anterior es verdadera, que soy RESIDENTE de Arizona, que NO se me ha condenado por un DELITO GRAVE (o que mis derechos civiles han sido restituidos - vea en el reverso los detalles), y que NO se me ha dictaminado INCAPACITADO/A con mis derechos electorales revocados. SIGNATURE / FIRMA DATE / FECHA		23 If no street address, draw a map and/or provide the latitude/longitude or geocode here / Si no tiene domicilio de calle, dibuje un mapa y/o provea la latitud/longitud o código geográfico aquí	
24 If you are unable to complete or sign the form, the form can be completed at your direction. The person who assists you must sign here. Si usted no puede completar o firmar el formulario, este formulario se puede llenar según sus instrucciones. La persona que le ayude a hacerlo debe firmar aquí. SIGNATURE OF PERSON ASSISTING / FIRMA DE LA PERSONA QUE LE AYUDÓ DATE / FECHA			

The required fields are in **red**. All others are optional, but helpful for security purposes. Don't forget to sign!

By choosing "**Yes**", you will automatically receive ballots by mail.



Have more questions? Contact the Pima County Recorder's Office.

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Social: @pimarecorder



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