

Arjiga Diiwaangelinta Codbixiyaha Minnesota

Arjigaaga ku gudbi bogga internetka mvotes.org ama Buuxi sadarada 1 ilaa 8 ee foomkan. Fadlan si fashiix ah u qor.

Macluumaadka Qofka & u Qalmidda

Somali Voter Registration with Voucher Form 2016

1. Ma tahay muwaadin Maraykan ah? Haa <input type="checkbox"/> Maya <input type="checkbox"/>		election office use only	
2. Ma jiri doontaa ugu yaraan 18 qatiga doorashada soo socota ama ka hor? Haa <input type="checkbox"/> Maya <input type="checkbox"/>		IP	
Haddii aad calaamadayso "Maya" labada su'aalood middood, HA buuxin foomkan.		M	
		AB	
3. magaca dambe ama awoowaha	magaca koowaad	magaca dhexe (aabaha)	magaca la raaciyoo (Jr., Sr., II, III)
4. cinwaanka meesha aad ku nooshahay (guriga)	qolka (apt.)	magaalada	lambarka boostada (zip code)
5. haddii aan boostada la gayn karin cinwaanka kore, sheeg P.O. Box		magaalada	lambarka boostada (zip code)
6. taariikhda dhalashada (ma aha taariikhda maantay)	dugsiga degmada (haddii la yaqaan)	degmada aad ku nooshahay	
_____ - _____ - _____			
lambarka taleefoonka	cinwaanka emailka		
_____ - _____ - _____			
7. calaamaday hal sanduuq sheegna lambarka ku saameeya:			
<input type="checkbox"/> Waxaan leeyahay shati dareewal oo MN ay bixisay ama warqad aqoonsi oo MN bixisay lambarkeeduna yahay:		<input type="checkbox"/> Ma lihi shati dareewal oo MN bixisay ama Warqad Aqoonsi oo MN bixisay.	
<input type="checkbox"/> Afarta lambar oo u dambeeyaa Sooshaal Sikuuradkayga waa:		<input type="checkbox"/> Ma lihi shati dareewal ee MN, Warqad Aqoonsi ee MN ama Sooshaal Sekuurad Lambar.	
		XXX-XX-____	

Wax ka beddelidda Isdiiwaangelinta - Hadda ma waxaad ku diiwaangashan tahay magac ama cinwaan aan kii hore ahayn?

magaca dambe ee aad markii hore lahayd	magaca hore ee aad markii hore lahayd	magaca dhexe ee aad markii hore lahayd
_____	_____	_____
cinwaankaagii hore ee aad ku diiwaangashanayd	magaalada	gobolka
_____	_____	lambarka boostada (zip code)
_____	_____	_____

Akhri oo Saxiix Kaliya Haddii Dhammaan Qaybuhu ku Saameeyaan Adiga.

8. Waxaan caddaynayaa in:

- aan noqon doono ugu yaraan 18 sano jir maalinta doorashada;
- aan ahay muwaadin Maraykan ah;
- aan ku noolaa Minnesota 20 maalmood oo ka horeeya maalinta doorashada;
- aan degganaan doono cinwaanka ku yaal arjigan;
- aanan amar maxkameed cidna ku hoos joogin kaasoo igala noqonaya xaqqayga codbixinta;
- aanan maxkamadi xukumin in sharci ahaan aanan codayn karin;
- aan xaq u leeyahay in aan codeeyo sababtoo ah, haddii la igu xukumay dembi culus, waa dhacay waqtigii dembigaas culus (waa la dhammaystiray) ama waa la iga dhaafay ciqaabta xukunkii igu dhacay; iyo
- aan akhriyay fahmayna caddayntan, in macluumaad been ah la sheego ay tahay dembi culus ciqaabtiisuna noqon karto xarig aan ka badnayn 5 sano, ganaax aan ka badnayn \$10,000, ama labadaba.

saxiix halkan: **X** _____ taariikhda: _____ - _____ - **20** _____

Election Judge Official Use Only

W _____ P _____ SD _____ Initials _____	ID with Current Name & Address ID Number: _____ <input type="checkbox"/> MN Driver's License, Learner's Permit, MN ID Card, or Receipt <input type="checkbox"/> Tribal ID Card	Photo ID + Document with Current Name & Address Document Type: _____ Photo ID Number: _____ <input type="checkbox"/> Driver's License, Learner's Permit or State ID Card <input type="checkbox"/> U.S. Passport <input type="checkbox"/> Tribal ID <input type="checkbox"/> U.S. Military or Veteran ID <input type="checkbox"/> Student ID	Other <input type="checkbox"/> Vouched For <input type="checkbox"/> Notice of Late Registration <input type="checkbox"/> Valid Registration in Same Precinct <input type="checkbox"/> Student ID with College List ID Number: _____
--	--	---	---



Wixii ah macluumaad dheeraad ah oo ku saabsan codbixinta ama natiijada doorashada gobolka waxaad tagtaa bogga internetka ee Xoghayaha Gobolka Minnesota (Minnesota Secretary of State) www.sos.state.mn.us ama lacag la'aan ku wac **1-877-600-VOTE (1-877-600-8683)** ama isticmaal Minnesota Relay Service (Adeegga War Laliska Minnesota) ahna 1-800-627-3529 ama 711. Gargaar khaas ah ayay heli karaan dadka da'da weyn, itaalka daran, ama ku jira goob daryeel caafimaad. La xiriir Xoghayaha Gobolka ama Hubiyaha Degmadaada wixii ah macluumaad dheeraad ah.

Ogaysiiska Qarsoodiga: Taariikhda dhalashadaada saxda ah, cinwaanka emailkaaga, iyo wixii lambaro aqoonsi ee aad bixiso (Shatiga dareewalka Minnesota, Warqadda Aqoonsiga ee gobolka ama afarta lambar ee ugu dambeeya Sooshaal Sikuuradka) waa asturanyihiin. Macluumaadkan waxaa kaliya oo heli kara saraakiisha doorashada iyo hay'ado kale oo dawladeed ee loo idmay. Saraakiisha doorashadu waxay u isticmaalaan taariikhda dhalashadaada saxda ah iyo lambarkaaga aqoonsiga in ay ka xaqiijiyaan aqoonsigaaga Minnesota Department of Public Safety (Waaxda Nabadgeliyada Bulshada ee Minnesota) ama Social Security Administration (Maamulka Sooshaal Sikuuradka). Haddii aad leedahay Warqad Aqoonsi laakiin aad diidid in aad lambarka bixisid, arjigaagu ma dhammaystirmayo, waxaana laga yaabaa in aad codsato mar labaad ama aad tustid caddayn deganaansho inta aadan codayn. Saraakiisha doorashadu waxay kuu waydiiyaan emailkaaga si ay kaagala xiriiri karaan arrimaha arjigaaga. Sidoo kale, Xafiiska Xoghayaha Gobolka ayaa kuu soo diri kara email (ama si kale kuula xiriiri kara) taas oo ku saabsan arrimaha codbixinta iyo doorashada, ama ku weydiin kara ra'yiga bulshada ee ku saabsan codbixinta iyo doorashada. Inta kale ee ah macluumaadka ku qoran arjigaaga waa mid dadweynaha u furan marka loo isticmaalo doorashada, siyaasadda ama ujeedooyin nabadsugid ama arrimaha la xiriira xulista xeerbeegta (Jury). Haddii aad doonaysid in macluumaadkaaga xiriirka ay asturnaadaan ama qarsoodi ahaadaan sababo amni awgeed, wac 1-877-600-8683 si aad u ogaatid waxaad samayn kartid.

Foomka Damaanadda (Voucher Form)

Aniga oo ah, _____ waxaan ku dhaaranayaa ama xaqiijinayaa (Mid sax):
(Magaca Damiinka)

- Waxaan horay uga diiwaangashanaa in aan ka _____ # Warqad Aqoonsiga ee Codbixiyaha: _____
codeeyo xaafaddan (Waxaa buuxinaya garsooraha doorashada)
- Waxaan iska diiwaangeliyay maanta xaafaddan mana haysan qof kale oo i damiinta.
- Waxaan shaqaale ka ahay xarun degganaansho _____
(Magaca Xarunta degganaanshaha)

Cinwaanka Deganaanshaha ee Damiinka ama Cinwaanka Xarunta Degganaanshaha

Cinwaanka Wadada	Magaalada
Lambarka Taleefoonka:	Cinwaanka E-mailka (akhtiyaar)

Qof ahaan waxaan aqaan in _____ uu deggan yahay xaafadda.
(Magaca qofka diiwaangelinaya)

Saxiixa Damiinka

Election Judge Official Use Only

Subscribed and sworn to before me

_____/_____/_____
Date

Signature of Election Judge