Division of Elections
Tre Hargett, Secretary of State

State of Tennessee
312 Rosa L. Parks Avenue, 9th Floor
Nashville, Tennessee 37243
615-741-7956

CERTIFICATE OF RESTORATION
for Persons Convicted of a Felony After May 18, 1981
STATE OF TENNESSEE

TO BE COMPLETED BY AN AGENT OF THE PARDONING AUTHORITY, AN AGENT OR OFFICER OF THE INCARCERATING AUTHORITY, OR A PROBATION/PAROLE OFFICER OR AGENT OF THE SUPERVISING AUTHORITY.

1. I hereby certify that the following information is true and correct:
   a. Applicant's Name: _____
   b. Applicant's County of Residence: _____
   c. Felony Conviction: _____
   d. Month/Day/Year of Conviction: _____
   e. Date of Birth: _____ f. Soc. Sec. No.: _____

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2. On the _____ day of _____, _____ ***(check one)***
   - ☐ The above individual received a pardon which contained no special conditions pertaining to the right of suffrage. A copy of said pardon is attached hereto; *or*
   - ☐ The maximum sentence imposed for such infamous crime has been served by the above individual; *or*
   - ☐ The maximum sentence imposed for such infamous crime has expired; *or*
   - ☐ The above individual has been granted final release from incarceration or supervision by the Board of Probation/Parole, the Department of Correction, or county correction authorities.

Signature: _____ Date: _____
Printed Name: _____ Title: _____
Address: _____ Phone Number: _____

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3. I hereby certify that the following is true and correct: ***(check one)***
   - ☐ The court did not order the above individual to pay any restitution as part of his or her sentence; *or*
   - ☐ All of the restitution ordered by the court as a part of the sentence for the above individual has been paid.

Signature: _____ Date: _____
Printed Name: _____ Title: _____
Address: _____ Phone Number: _____

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4. I hereby certify that the following is true and correct: ***(check one)***
   - ☐ The court did not order the above individual to pay any court cost as part of his or her sentence; *or*
   - ☐ All court cost assessed against the above individual has been paid; *or*
   - ☐ The court has made a finding at an evidentiary hearing that the above individual is indigent at the time of application.

Signature: _____ Date: _____
Printed Name: _____ Title: _____
Address: _____ Phone Number: _____

SEE REVERSE FOR INSTRUCTIONS

INSTRUCTIONS

Instructions to the Agent Completing the Certificate of Restoration:

In order to complete any section of this form, the agent must have access to the information being attested to on this form.

1. In **BOX #1**, the proper authority/agent must provide the requested applicant information.

   NOTE: For 1c, list the crime(s) for which the person was convicted.
   For 1d, list the date the person was convicted for the crime listed in 1c.

2. In **BOX #2**, the proper authority/agent must provide the following information:
   a) Provide the date that corresponds to the box that is checked
   b) Check the appropriate box indicating how the applicant completed their sentence
   c) Provide your signature (print name below signature) and contact information

3. In **BOX #3**, the proper authority/agent must provide the following information:
   a) Check the appropriate box as it relates to any restitution that was or was not assessed to the applicant.
   b) Provide your signature (print name below signature) and contact information.

4. In **BOX #4**, the proper authority/agent must provide the following information:
   a) Check the appropriate box as it relates to any court fines that were assessed to the applicant.
   b) Provide your signature (print name below signature) and contact information.

Persons convicted of any of the following, cannot have his or her voting rights restored:

- Between July 1, 1986, and June 30, 1996 - first degree murder, aggravated rape, treason, or voter fraud
- Between July 1, 1996, and June 30, 2006 - murder, rape, treason, or voter fraud
- On or after July 1, 2006 – Any of the above, or any degree of murder or rape or any felony offense under TCA Title 39, Chapter 16, parts 1, 4, or 5; or any sexual offense under TCA §40-39-202(17) or any violent sexual offense under TCA § 40-39-202(25) designated as a felony and where the victim of such offense was a minor

Instructions to the Applicant Seeking to have His or Her Voting Rights Restored:

- After completion, the original form must be filed with the local county election commission office in the county the applicant desires to register to vote.

NOTICE

A person is not eligible to apply for a voter registration card and have their voting rights restored unless the person is current in all child support obligations. Before restoring the voting rights of an applicant, the Coordinator of Elections will verify with the Department of Human Services that the applicant does not have any outstanding child support payments or arrearages.