APPLICATION FOR VOTE BY MAIL BALLOT

	Please type or print clearly in ink. All information required unless marked optional. MILITARY/OVERSEAS VOTER ONLY				
	I hereby apply for a Mail-In Ballot for the: I request Vote-By-Mail Ballots for all elections in which eligible to vote and I am (MARK ONLY ONE)				
	(CHECK ONLY ONE)				rices or Merchant Marine on active
	☐ General (November) ☐ Primary	☐ Municipal ☐ Sch	The proof of the second	duty, or an eligible spouse or dep	
	☐ Special To t	pe held on / / (Date)		A U.S. Citizen residing outside th A U.S. Citizen residing outside th	e U.S. and I intend to return. e U.S. and I do not intend to return.
	Last Name (Type or Print)	First Name	(Type or Print)	Middle Name or Init	ial Suffix (Jr., Sr., III)
2	*				
	Address at which you are registe	ered to vote	Mail	my ballot to	
	Street Address or RD#	Apt.	the	following address:	Same Address as Section 3
	Substitudios of their	7,50		include	
3			A PO Bo	x, RD#.	
	Municipality (City/Town)	State Zip	State/P	AND THE PARTY OF T	
	Warnerpairty (e.g., e.m.,	State Zip		tal Code ———————untry	
			(if outsi	TO THE RESIDENCE OF THE PROPERTY OF THE PROPER	
	Date of Birth	Day Time Phone Nu	mher	E-Mail Address (Optional)	
5	bate of bilting	()	7	L-Iviali Address (options)	
	Signature Please sign y	our name as it appea	rs in the Poll Book		Today's Date
8	Y			9	
					1 1
	OPTIONAL - ONLY	COMPLETE SE	CTIONS 10	THROUGH 12 IF AP	DI ICABI E
	Voter Options to Automatically Receive Ballots in Future Elections You may choose either option, both options, or none of the options. YOU ARE NOT REQUIRED TO CHOOSE AN OPTION.				
	If you do not choose any option, you will only be sent the ballot for the election you chose in Section 1.				
10		r process file on the second			THIS CALENDAR VEAR
*B I wish to receive a Mail-In Ballot for all elections to be held during the REMAINDER OF THIS CA B I wish to receive a Mail-In Ballot in ALL FUTURE NOVEMBER GENERAL ELECTIONS, until I					
	*Please Note: Your ballot can only be sent to th				to the control of the
	Assistor Any person providing assistar	and to the votor in or	ampleting this on	nlication must complete t	his section
		ice to the voter in co			1-00-00-0
11	Name of Assistor (Type or Print)		Signature of Assistor Date		
	Address		X Ant IMu	nicipality (City/Town)	
	Address		Apt. Mu	nicipality (City/Town)	State Zip
	Authorized Messenge) r			
			Massangar Massa	ngar shall ha a family mamh	er or a registered voter of this
	Any voter may apply for a Mail-In Ballot by Authorized Messenger. Messenger shall be a family member or a registered voter of the County. No Authorized Messenger can (1) be a Candidate in the election for which the voter is requesting a Mail-In Ballot or (2) serves as messenger for more than TEN qualified voters per election. I designate				
	Print Name of Authorized Messenger Address of Messenger Apt. Municipality (City/Town) State Zip Date of Birth				
	Address of Messenger	Apt.	Wallelpality (State Zip	Jate of Birth
12					' '
	Signature of Voter X			Date / /	
	Date				
	Authorized Messenger must sign application and show photo ID OFFICE USE ONLY				
	in the presence of the County Clerk or County Clerk designee. Voter Reg #				
	"I do hereby certify that I will deliver the Mail-In Ballot directly to				
BH SHIELD				Muni Codo #	Party
	the voter and no other p				Party
		person, under penalty			Party

INSTRUCTIONS

- · Fill out application.
- Print and sign your name where indicated.
- Mail or Deliver application to the County Clerk

DO NOT FAX OR E-MAIL

Unless you are a Military or Overseas Voter

VOTING INFORMATION

- You must be a registered voter in order to apply for a Mail-In Ballot.
- Once you apply for a Mail-In Ballot, you will not be permitted
 to vote by machine at your polling place in the same election.
- 3. You will receive instructions-with your ballot.
- Your Mail-In Ballot must be received by the County Board of Election before close of polls on Election Day.
- 5. Do not submit more than one application for the same election
- You must apply for a Mail-In Ballot for each election, unless you designate otherwise under "Voter Options."

PLEASE NOTE

*ELECTION MAIL Authorized by the U.S. Postal Service

A voter may apply for a Mail-In Ballot by mail up to 7 days prior to the election. He or she may also apply in person to the County Clerk until 3 P.M. the day before the election.

Note also that voters have an option of indicating on an application for a Mail-In Ballot that they would prefer to receive a ballot for each election that takes place during the remainder of the calendar year.

Voters also now have an option of automatically receiving a Mail-In Ballot for each General Election. If such voter no longer wants this option, the County Clerk's office must be notified in writing.

WARNING

This application must be received by the County Clerk not later than 7 days prior to the election, unless you apply in person or via an authorized messenger during County Clerk's office hours, but no later than 3 P.M. the day prior to the election.

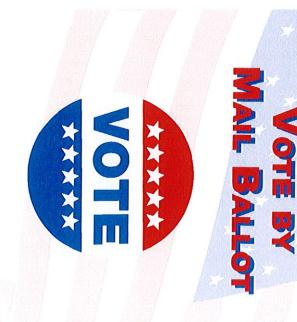
Name

Street Address

City, State, Zip Code

PLACE
POSTAGE
HERE
BEFORE
MAILING

APPLICATION FOR VOTE BY MAIL BALLOT



Please Seal with Tape and Return