

Complete and return to:

Application for Absent Voter's Ballot

Approved by _____

YOU MUST SELECT ONE BALLOT TYPE BELOW. IF YOU DO NOT SELECT A BALLOT TYPE, A BALLOT WILL NOT BE ISSUED TO YOU.

Check reason(s) why you are requesting ballot. If a reason is not checked for an election, an absentee ballot will not be issued for that election.

WARNING: A person who makes a false statement in this Declaration is guilty of a misdemeanor.

CHECK REASON FOR REQUESTING AN ABSENT VOTER BALLOT BELOW

- I am 60 years of age or older.
- I expect to be absent from the community in which I am registered for the entire time the polls are open on election day.
- I am physically unable to attend the polls without the assistance of another.
- I cannot attend the polls because of the tenets of my religion.
- I have been appointed an election precinct inspector in a precinct other than the precinct where I reside.
- I cannot attend the polls because I am confined to jail awaiting arraignment or trial.

ARE YOU A UNITED STATES CITIZEN?

YES NO

I declare the foregoing statement(s) to be true

SIGN HERE ➔

X

(Signature of Absent Voter)

(Date)

NOTE: Michigan law requires that A.V. Ballots be sent to your registered address unless you are hospitalized, institutionalized, or at an address outside of your community. Complete the following ONLY if you want your ballot sent to an address outside of your community or to a hospital or other institution.

COMPLETE ONLY IF YOU WANT YOUR BALLOT SENT TO AN ADDRESS OTHER THAN YOUR REGISTERED ADDRESS

I will not be at my registered address, therefore send "Absent Voter Ballot" to me at:

(NAME) _____

(NO.) _____ (Street) _____

(City) _____ (State) _____ (Zip) _____

PLEASE ADVISE PHONE NUMBER FOR ANY INQUIRIES

PHONE NO.

() _____

**SELECT BALLOT TYPE HERE
YOU MUST SELECT ONE BALLOT TYPE!**

I hereby request the ballot type marked below for this election. (You must select one ballot type below. If you do not select a ballot type, a ballot will not be issued to you.)

SELECT ONLY ONE BALLOT TYPE:

- REPUBLICAN PARTY**
Presidential Primary Ballot
- DEMOCRATIC PARTY**
Presidential Primary Ballot

(Clerk's Use Only)

Filed: ____/____/____ Mailed: ____/____/____ Returned: ____/____/____

Wd/Pct: ____ Ballot No: _____ Clerk: _____

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(DO NOT DETACH)

SEE REVERSE SIDE FOR ADDITIONAL INSTRUCTIONS AND WARNINGS

Application to Vote – Poll List (Absent Voter)

WARD/ PRECINCT



DATE OF ELECTION



I hereby certify that I am a registered and qualified elector in the ward and precinct above and hereby make application to vote at the above indicated election.

Ballot No.: _____

Voter No.: _____
(Poll Book)

____/____/____
Date of Birth (Month/Day/Year)

Please Print Full Name

Are you a United States Citizen? Yes No

SIGN HERE

➔ X

Signature of Absent Voter

Approved – _____

(Registered Home address of Absent Voter)

(Inspector of Election)