APPLICATION FOR ABSENT VOTER'S BALLOT

PLEASE PRINT OR TYPE (See Instructions at Bottom of Page)

Voter's Name	Send Ballot to: (if different from home address)
Voter's Name	Name
	care of/PO BoxAddress
CountyZip Code	
You must provide your birthdate: / (month) (day)	(year)
utility bill, bank statement, government check, pay registration notification mailed by a board of elect	military identification, or a current (within the last 12 months) ycheck or other government document (other than a voter ions) that shows your name and current address.
I wish to vote in the following election to be held on	1
Check ONLY one (A separate application must be co 1. Primary Election:	(month-date-year of election) mpleted for each election):
	General Election
Republican Nonpartisan or issues only 3.	Special Election
I hereby declare, under penalty of election falsification, I to the best of my knowledge and belief. I understand tha application cannot be processed.	am a qualified voter and the statements above are true
XSignature of Voter	Date Signed
Voluntary: To assist the board of elections in contacting you	in a timely manner if your application is incomplete:
Your daytime telephone number ()	Your e-mail address IS GUILTY OF A FELONY OF THE FIFTH DEGREE
INSTRUC Chapter 3509. of the F	
you are a qualified elector in the county; and one of the following social security number, or a copy of your current and valid photo 12 months) utility bill, bank statement, government check, paych notification mailed by a board of elections) that shows your name	partisan primary election, your political party affiliation; statement g: your Ohio drivers license number, the last four digits of your identification, a military identification, or a current (within the last leck or other government document (other than a voter registration