Complete and return to:

Absent Voter Ballot Application

Approved by_____

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

- ☐ 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.

I certify that I am a United States citizen and a registered and qualified elector and that the statements in this Absent Voter Ballot Application are true

SIGN HERE X _____ (Signature of Absent Voter) ____/____/____ (Date)

WARNING: You must be a United States citizen to vote. If you are not a United States citizen, you will not be issued an absent voter ballot. A person making a false statement in this absent voter ballot application is guilty of a misdemeanor. It is a violation of Michigan election law for a person other than those listed in the instructions to return, offer to return, agree to return, or solicit to return your absent voter ballot application to the clerk. An assistant authorized by the clerk who receives absent voter ballot applications at a location other than the clerk's office must have credentials signed by the clerk. Ask to see his or her credentials before entrusting your application with a person claiming to have the clerk's authorization to return your application.

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:

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.

(NAME) _____

(NO.) (Street) _____

(City) (State) (Zip) _____

PLEASE ADVISE PHONE NUMBER FOR ANY INQUIRIES

PHONE NO. ( )

CLERK'S USE ONLY

Wd/Pct: Mailed: ____/____/____ Returned: ____/____/____

Filed: ____/____/____ Ballot No: _____ Clerk: _____

(DO NOT DETACH) PRINTING SYSTEMS • TAYLOR, MI • (800) 95-12345 • **FORM #575** (4/13)

SEE REVERSE SIDE FOR ADDITIONAL INSTRUCTIONS

WARD/ PRECINCT

Application to Vote – Poll List
(Absent Voter)

DATE OF ELECTION

Ballot No.: _____

Voter No.: _____ (Poll Book)

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

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

_____
Please Print Full Name

SIGN HERE

X _____
Signature of Absent Voter

Approved –

_____ (Registered Home address of Absent Voter)

_____ (Inspector of Election)

INSTRUCTIONS TO ELECTION INSPECTORS – Place this in binder with other Applications to Vote