

Absentee Ballot Application

R.C. 3509.03

Voter Name Required	1	First _____ Middle _____ Last _____ Suffix _____
Date of Birth Required	2	Date of Birth (do not write today's date here) _____ MM/DD/YYYY
Address at Which you are Registered to Vote Required	3	Street Address (no P.O. boxes) _____ County <u>LUCAS</u> ▾ City/Village _____ ZIP _____
Mailing Address Required only if you wish to have your ballot mailed to a different address than the address at which you're registered to vote.	4	Street Address (or P.O. box) _____ City/Village _____ State _____ ▾ ZIP _____
Identification Required You must provide <u>ONE</u> of the following.	5	<input type="checkbox"/> Your Ohio driver's license number (2 letters followed by 6 numbers) _____ OR <input type="checkbox"/> Last four digits of your Social Security number _____ OR <input type="checkbox"/> Copy of a current and valid photo identification, military identification, or a current (within the last 12 months) utility bill, bank statement, government check, paycheck or other government document (other than a notice of voter registration mailed by a board of elections) that contains your name and current address.
Election Required You must complete a separate application for each election.	6	Date of Election (do not write today's date here) _____ MM/DD/YYYY <input type="checkbox"/> General Election <input type="checkbox"/> Special Election <input type="checkbox"/> Primary Election For a PARTISAN primary election only, you must choose the type of ballot: <input type="checkbox"/> Political party ballot Name of Political Party _____ <input type="checkbox"/> Issues only ballot
Affirmation Required	7	<ul style="list-style-type: none"> I wish to have an absentee ballot mailed to me at the address listed above. I understand this request must be received by my board of elections no later than noon on the Saturday before Election Day if by mail or by 2 p.m. the day before the election if in person. I understand that if an absentee ballot is mailed to me and I change my mind and go to my polling place to vote on Election Day, I will be required to vote a provisional ballot that cannot be counted until at least 11 days after Election Day. I understand that, if I do not provide the required information, my application cannot be processed. I hereby declare, under penalty of election falsification, that I am a qualified elector and the statements above are true. Signature X _____ Today's Date _____ MM/DD/YYYY

To assist the board of election in contacting you in a timely manner if your application is incomplete, please provide the following information.

Telephone Number _____ E-mail Address _____

WHOEVER COMMITS ELECTION FALSIFICATION IS GUILTY OF A FELONY OF THE FIFTH DEGREE.