APPLICATION FOR ABSENT VOTER'S BALLOT		For Office Use
PLEASE PRINT OR TYPE (See Instructions at Bottom of Pa	age)	APPLICATION #
MAIL TO: DELAWARE COUNTY BOARD OF ELECTIONS		PRECINCT/TOWNSHIP
2079 US Highway 23 North, PO Box 8006, Dela	ware OH 43015	SCHOOL DISTRICT
PLEASE PRINT OR TYPE	Send Ballot to: (if di	fferent from home address)
Voter's Name	Name	
Home Address Care of/PO Box		
City, Village, or Post Office Address		
CountyZip Code		StateZip Code
*You must provide your birth date://AND		
<ul> <li>*one of the following:</li> <li>Your Ohio driver's license number</li> <li>The last four digits of your social security number</li> <li>Copy of a current and valid photo identification, a mili bill, bank statement, government check, paycheck, or o notification mailed by a board of elections) that shows</li> </ul>	tary identification, or a other government docur	nent (within the last 12 months) utility
*I wish to vote in the following election to be held on(Mont	h-Date-Year of Election	<u>.</u>
*Check ONLY one (A separate application must be completed for		
1. <b>Primary Election</b> □ Constitution □ Libertarian	□ Nonpartisan or	issues only
□ Democratic □ Republican □ Green □ Socialist	1	
2.  General Election 3.  Special Election		
I wish to have a ballot mailed to me at the address listed above. mind and appear at my polling place to vote on Election Day, I counted until at least 10 days after the election. I hereby declare, under penalty of election falsification, I am a my knowledge and belief. I understand that if I do not provide *X	will be required to vot qualified voter and the	te a provisional ballot that can not be e statements above are true to the best of
SIGNATURE OF VOTER Voluntary: To assist the board of elections in contacting you in a	timely manner if your a	Date Signed
Your daytime telephone number () Your e-ma		
*Required information WHOEVER COMMITS ELECTION FALSIFICATION	N IS GUILTY OF A FELO	NY OF THE FIFTH DEGREE
<b>INSTRU</b> Chapter 3509. of the F		
<ol> <li>Use of this form is optional. To be valid, your application must include the election for which the ballot is requested and, if a partisan primal fied elector in the county; and one of the following: your Ohio drived or a copy of your current and valid photo identification, a military is statement, government check, paycheck, or other government documelections) that shows your name and address.</li> <li>An application by mail must be received by your county board of elyou in person must be received by the close of regular board office hospitalized or for persons whose minor child is hospitalized due to</li> </ol>	ary election, your political ers license number, the last dentification, or a current ment (other than a voter re lections by noon on the thi hours the day before the el	party affiliation; statement you are a quali- t four digits of your social security number, (within the last 12 months) utility bill, bank gistration notification mailed by a board of rd day before the election. An application by lection. Application for persons who are
<ol> <li>3 p.m. on election day.</li> <li>When you receive your ballot: If you return your ballot my mail, it is received by your county board of elections no later than 10 days afted elivers it to the board for you, it must be delivered to your county ly you are a voter outside of the United States on Election Day, the bal and received by the board no later than 10 days after Election Day on NOTE : "Postmarked" does not include a date marked by a post of the states of the states</li></ol>	must be postmarked no lat er the election. If you retu board of elections no later llot envelope must be sign or 20 days after a president	er than the <b>day before</b> Election Day and irn your ballot in person or if a near relative than the close of polls on Election Day. If ed or postmarked before the close of polls ial primary election.