

Complete and return to:

Approved by _____

Absent Voter Ballot Application

Clerk's Name & Address

Voter's Name & Address

Check reason 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: You must be a United States citizen to vote. If you are not a United States citizen, you will not be issued an absentee voter ballot. A person making a false statement in this absentee voter application is guilty of a misdemeanor.

See reverse side for additional instructions and warnings.

CHECK REASON FOR REQUESTING AV BALLOT HERE

- 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 THAT THE STATEMENTS IN THIS ABSENT VOTER BALLOT APPLICATION ARE TRUE

Date of Birth

/ /

SIGN HERE

X

Phone No.

SIGNATURE OF ABSENT VOTER

DATE

NOTE: Michigan law requires that Absent Voter 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.
SEND ELECTION BALLOT TO:

Street Address

City

State

Zip

CLERK'S USE ONLY

Ward/Pct. _____

Mailed / /

Ballot No. _____

Filed / /

Returned / /

Clerk _____

Application to Vote - Poll List (Absent Voter)

VOTER - DO NOT DETACH

Ward/Precinct



DATE OF ELECTION



I certify that I am a United States citizen and a registered and qualified elector in this precinct, and hereby make application to vote at this election.

Ballot No. _____

Voter No. (Poll Book) _____

SIGN HERE X

Signature of Absent Voter

Print Name: _____

Date of Birth: _____

Residence Address: _____

Approved -

Election Inspector

Thank you for applying for an absentee voter ballot. We hope you will fully exercise your voting rights and participate in every upcoming election.

If you have any questions, please contact your city or township clerk.

