

Application for Absent Voters Ballot

FOR THE _____ ELECTION

TO BE HELD ON _____
(Date)

I, _____, a duly qualified and registered
(PRINT NAME)

elector of the _____ Ward _____ Precinct of the _____
(TOWNSHIP, VILLAGE OR CITY)

of _____ in the County of _____ and
(NAME OF TOWNSHIP, VILLAGE OR CITY)

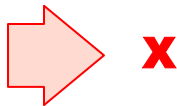
State of Michigan, hereby make application for an official ballot, or ballots, to be voted by me at such election.

CHECK REASON WHY YOU ARE REQUESTING BALLOT(S). IF A REASON IS NOT CHECKED AN ABSENTEE BALLOT WILL NOT BE ISSUED.

- 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 am 60 years of age or older.
- I cannot attend the polls because I am confined to jail awaiting arraignment or trial.

I DECLARE THE FOREGOING STATEMENT TO BE TRUE

**SIGN
HERE**



(Signature of absent voter) _____
Date

WARNING: A person who makes a false statement in this declaration is guilty of a misdemeanor.

NOTE: MICHIGAN LAW REQUIRES 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 ADDRESS INFORMATION ONLY IF YOU WANT YOUR BALLOT(S) SENT TO AN ADDRESS OUTSIDE OF YOUR COMMUNITY OR TO A HOSPITAL OR OTHER INSTITUTION.

Send "Absent Voter Ballot" to me at _____
(NUMBER) (STREET)

(CITY) (STATE) (ZIP)

My registered address is _____
(NUMBER) (STREET)

**(FOR CLERK'S USE ONLY)
CLERK'S RECORD**

Filed _____ Ballot No. _____ Ward/Precinct _____

Mailed _____ Returned _____

Clerk _____