Application Received:

Ballot Sent/Delivered:

Application for Absentee Ballot

March 3, 2023 Municipal Election and Referendum

Municipality of Sedgwick

Absentee ballot requests must be received by the clerk by the close of business on 2/28/2023.

Voted absentee ballots must be received by the municipal clerk by 6 p.m. on 3/3/2023, unless special circumstances exist.

1. Full Name of Registered Voter Requesting the Ballot \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Residence Address of Voter \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Street Address) (Municipality)

1. Voter’s Date of Birth \_\_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_ / \_\_\_\_\_\_\_

mm dd yyyy

1. **Contact Information (please complete). Clerk will use only to notify the voter if there is a problem with the application or ballot.**

**Daytime Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. Method of Delivery of Ballot to the Voter:
   * 🞎  Issued to Voter (Application required only if voter will vote outside the clerk’s presence)
   * 🞎  By Mail to this Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
   * 🞎  By Immediate Family Member of Voter designated here:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
   * 🞎 By this 3rd Person (designated here): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6. Signature of Voter OR Immediate Family Member:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Signature)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Relationship to Voter)

Note: If an immediate family member of the voter is completing this application, the relationship to the voter must be provided above. The absentee ballot can be delivered to the immediate family member in person or mailed to the address provided above.

7. Signature of Immediate Family Member Returning the Ballot \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship to Voter \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**(Complete Section #7 only if ballot was delivered to the voter or a different immediate family member of voter)**

**AIDE CERTIFICATE (Must be completed if applicant was Assisted as Designated below)**

If the voter received assistance in reading and/or signing this application, the person who assisted the voter must complete and sign this certificate.

I helped this voter: ❒read the application ❒sign the application ❒read and sign the application

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature of Aide

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Printed Name of Aide