

INSTRUCTIONS FOR APPLICANTS FOR ABSENT VOTER BALLOTS

- Step 1. After completely filling out the application, sign and date the application in the place designated. Your signature must appear on the application or you will not receive an absent voter ballot.
- Step 2. Deliver the application by 1 of the following methods:
- (a) Place the application in an envelope addressed to the appropriate clerk and place the necessary postage upon the return envelope and deposit it in the United States mail or with another public postal service, express mail service, parcel post service, or common carrier.
 - (b) Deliver the application personally to the office of the clerk, to the clerk, or to an authorized assistant of the clerk.
 - (c) In either (a) or (b), a member of the immediate family of the voter including a father-in-law, mother-in-law, brother-in-law, sister-in-law, son-in-law, daughter-in-law, grandparent, or grandchild or a person residing in the voter's household may mail or deliver the application to the clerk for the applicant.
 - (d) In the event an applicant cannot return the application in any of the above methods, the applicant may select any registered elector to return the application. The person returning the application must sign and return the certificate below.

Certificate of Authorized Registered
Elector Returning Absent Voter
Ballot Application

I certify that my name is _____, my address is _____, and my date of birth is ____/____/____ ; that I am

delivering the absent voter ballot application of _____ at his or her request; that I did not solicit or request to return the application; that I have not made any markings on the application; that I have not altered the application in any way; that I have not influenced the applicant; and that I am aware that a false statement in this certificate is a violation of Michigan election law.

Date

Signature

WARNING

A person making a false statement in this absent voter ballot application is guilty of a misdemeanor. It is a violation of Michigan election law for a person other than those listed in the above instructions to return, offer to return, agree to return, or solicit to return your absent voter ballot application to the clerk. An assistant authorized by the clerk who receives absent voter ballot applications at a location other than the office of the clerk must have credentials signed by the clerk. Ask to see his or her credentials before entrusting your application with a person claiming to have the clerk's authorization to return your application.

PLEASE COMPLETE AND RETURN TO:

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**



X

(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 No. _____

Mailed _____ Returned _____

Clerk _____

SEE BACK FOR ADDITIONAL INSTRUCTIONS

(DO NOT DETACH)

Application to Vote—Poll List

(Absent Voter)

Voter No. _____

Ward _____

DATE OF ELECTION _____ Precinct _____

I hereby certify that I am a registered and qualified elector in the above ward and precinct and hereby make application to vote at this election.

Date of Birth _____
(Month-Day-Year)

(Print Name)

**SIGN
HERE**



X

(Signature of Absent Voter)

X

(Registered Home Address of Absent Voter)

No. on Ballot
Issued

Approved

(Inspector of Election)

INSTRUCTIONS TO ELECTION INSPECTORS:

Place this in binder with the other Applications to Vote.