

Application for Absent Voter's Ballots  
PLEASE PRINT OR TYPE

Please Mail Application to:  
Tuscarawas County Board of Elections  
PO Box 69  
New Philadelphia, OH 44663

For Board Use Only:

Application received: \_\_\_\_\_  
Voter I.D. #: \_\_\_\_\_  
Precinct: \_\_\_\_\_  
School District: \_\_\_\_\_  
House/Senate District: \_\_\_\_\_  
Ballot Mailed Out: \_\_\_\_\_  
Person Voted In Office: \_\_\_\_\_

Voter's Name \_\_\_\_\_

Home Address \_\_\_\_\_

City, Village, or Post Office \_\_\_\_\_

County \_\_\_\_\_ Zip Code \_\_\_\_\_

Send Ballot to:  
(If different from home address)

Name \_\_\_\_\_

Care of/PO Box \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

You must provide your birthdate \_\_\_\_/\_\_\_\_/\_\_\_\_ and one of the following:  
Month Day Year

PLEASE CHOOSE ONE

- Your Ohio driver's license number \_\_\_\_\_ or
- The last four digits of your social security number \_\_\_\_\_ or
- Copy of a current and valid photo identification, a military identification, or a current (within the last 12 months) utility bill, bank statement, government check, paycheck or other government document (other than a voter registration notification mailed by a board of elections) that shows your name and current address.

I wish to vote in the following election to be held on \_\_\_\_\_

Check One: \_\_\_\_\_ (Date of Election)

1. Primary Election

- |                                       |                                      |   |
|---------------------------------------|--------------------------------------|---|
| <input type="checkbox"/> Constitution | <input type="checkbox"/> Libertarian | <input type="checkbox"/> Nonpartisan or issues only |
| <input type="checkbox"/> Democratic   | <input type="checkbox"/> Republican  |   |
| <input type="checkbox"/> Green        | <input type="checkbox"/> Socialist   |   |

2.  General Election

3.  Special Election

I wish to have a ballot mailed to me at the address listed above. I understand that if a ballot is mailed to me and I change my mind and appear at my polling place to vote on Election Day, I will be required to vote a provisional ballot that cannot be counted until at least 10 days after the election.

I hereby declare, under penalty of election falsification, I am a qualified voter and the statements above are true to the best of my knowledge and belief. I understand that if I do not provide the requested information, my application cannot be processed.

X \_\_\_\_\_  
SIGNATURE OF VOTER Date signed