

Application for Georgia Official Absentee Ballot

The information provided in this document is made under oath and penalty of law and will be used for official government purposes. When you sign this application, you affirm that you are a citizen of the U.S., currently reside in Georgia and are eligible to vote in Georgia. Giving false information on this application violates Georgia law and is punishable by a fine up to \$100,000, imprisonment for up to 10 years, or both.

Please print clearly. Be sure to complete all required sections. Date of Election Date of Primary, Election, or Runoff (mm/dd/yyyy) Required The application must be **received** by your election office* 11 days before the election. Print voter name Your name as it appears on your voter registration. 2 Required Suffix First Middle Last Type of ballot 3 Republican ☐ Non Partisan (will not have ANY party candidates listed) Democratic **Required** in primary The residential or mailing address on your voter registration. If you no longer reside at the address where you Residential address are registered to vote, contact your county election office prior to submitting this application. Required Your ballot will be 4 Address sent here unless you provide a temporary mailing address. City _ County _ **GA** Zip Temporary ballot This address must be in a different county** than the one where you are registered unless you are physically mailing address disabled or detained in jail or other detention facility. Only if you are temporarily 5 living outside the county* and want your ballot sent to this address. City -Contact information 6 Phone number **Email address** Recommended Georgia Driver's License Number or State Identification Card Number Voter identification Date of birth (mm/dd/yyyy) Required AND Print carefully. This information will be used ☐ I do not have a Georgia Driver's License or Identification Card to verify your identity. and I am providing a copy of acceptable identification below. Failure to provide Instructions: accurate information Make sure your identification on your may delay processing ID card or document is visible. your application. · Take a photo of your full completed You must provide your application and submit it Place identification here date of birth AND electronically to your elections office* (addresses are online: elections.sos. if you did not provide a Georgia a Georgia ga.gov/Elections/countyregistrars. Driver's License driver's license or ID number or Identification do). You may also submit a hard copy Card number of your application via U.S. mail or in ΩR person to your elections office*. a copy of an If your acceptable form of acceptable identification does not fit in this box, identification please attach a copy and submit it from the list in with your application. the instructions. I, the undersigned, do swear and affirm that I am eligible to vote in Georgia, am a citizen of the U.S. and the facts presented Voter oath and in this application are true. By signing this oath, you are swearing that you are the voter requesting an absentee ballot. signature Signing this oath on behalf of another voter violates Georgia law and is punishable by a fine up to Required \$100,000, imprisonment for up to 10 years, or both. 8 Voter, sign and date here (Required) Use a pen. No electronic signatures allowed. Date (mm/dd/yyyy) X

If you received this application with your information pre-filled, received multiple or duplicate copies of this application in the mail after you have already requested, received, or voted an absentee ballot, or if an unauthorized person offers to return your absentee ballot application, please report this to elections@sos.ga.gov.

Form continues ▶

APP-21_V2

This is NOT an official government publication and was NOT provided to you by any governmental entity and this is NOT a ballot. It is being distributed by:_____

Name and address of person, organization, or other entity distributing this document.



Application for Georgia Official Absentee Ballot

Print voter name	9	Your name as it appears on your voter registration. First Middle Last							_		
Required		First			Middle			Last		Su	ffix
Assisting a voter? If yes, the assistant must complete this section. Voter assistance is only allowed if the voter is illiterate or physically disabled.	10	a voter who is	not eligi 00,000 o	ble for a		pleting th	his a	oplication vi		tled to assistance. rgia law and is pu Date (mm/dd/y	nishable b
Requesting a ballot on behalf of a voter? If yes, complete this section. The voter must be physically disabled or temporarily residing out of the county** and must still be eligible to vote in the county** where he or she is registered.	11	are true and ti grandparent, son, daughter son-in-law, da father-in-law, the age of 18 a false statement my relations!	hat I am e brother,: r, niece, n aughter-ir brother-i and ackn ent on th hip to the nishable	either the sister, au ephew, g n-law, m in-law or owledge is applic e voter v		(che	eck or ohysio empo naturo	ne) cally disable orarily residi e of authoriz	d ng out of th	re-named voter is: ne county** gible requestor	
Ballot request opt-in Optional If you meet the eligibility criteria, you may opt-in to receive an absentee ballot for the rest of the elections cycle without making	12	☐ I opt-in to receive an absentee ballot for the rest of the election cycle. I am eligible for the reason selected below: ☐ D- Disabled. I am physically disabled ☐ E- Elderly. I am 65 years of age or older ☐ U- UOCAVA. I am a uniformed service member, spouse or dependent of a uniformed service member, or other US citizen residing overseas. (Complete the information to the right)				UOCAVA Voters only My current status is (check one)					
another application.		uniformed citizen resi	d service r iding ove	member rseas. (C	, or other US	(Option ballot b	nal) E be tra	By entering n ansmitted to	ny email, I me electro	request that my a onically.	bsentee
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