



Absentee Ballot Application

R.C. 3509.03

please print clearly (highlighted fields are required)

1) Your name

VOTER NAME

LOCAL ID #



2) Your contact information *(recommended)*

Contact information will be used by the board of elections to contact you in a timely manner if your application is incomplete.

Telephone Number: _____ Email: _____

3) Your home address at which you are registered to vote *(no P.O. Boxes or polling place addresses)*

VOTER ADDRESS

VOTER CITY, VOTER STATE VOTER ZIP

VOTER COUNTY

4) The address where you receive mail *(if different than above)*

Street Address *(or P.O. Box)*: _____

City: _____ State: _____ ZIP: _____

5) Your date of birth: _____

6) Your identification

Provide **ONE** of the following:

A. Write in the last four digits of your Social Security number: _____

B. Write in your Ohio driver's license number or state ID card number: _____

C. A COPY of a different form of current photo identification (a driver's license, state ID card, or interim ID form issued by the Ohio BMV; a US passport or passport card; or a US military ID card, Ohio National Guard ID card, or US Department of Veterans Affairs ID card). The copy of the photo ID must include images of the front and back, except for a passport which must include the passport's identification page.

7) Election in which you would like to vote *(you must complete a separate application for each election)*

November General Election

November 5, 2024

If a primary election is selected, indicate the type of ballot you would like to receive by selecting **ONE** of the following:

Democratic Republican Issues Only

Important: If selecting a partisan ballot in a primary election, the ballot will include all questions and issues which the voter is eligible to vote.

8) Affirmation

- I understand that, per Ohio law, the board of elections must receive this request no later than the close of business seven days before Election Day.
- I understand that if an absentee ballot is mailed to me and I change my mind and go to my polling place to vote on Election Day, I will be required to vote a provisional ballot.
- I understand that if I do not provide the board with all of the required information, my application cannot be processed.
- I hereby declare, under penalty of election falsification, that I am a qualified elector and the statements above are true.

Signature X

Today's Date: _____

9) I am interested in serving as a poll worker on Election Day. *(optional)* Yes No

WHOEVER COMMITS ELECTION FALSIFICATION IS GUILTY OF A FELONY OF THE FIFTH DEGREE.