

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 o	omple	te all required sections.						
Date of Election	1	Date of Primary, Election, or Runoff (mm/dd/yyyy) The application must be received by your county election office 11 days before the election.						
Print your name Required	2	Your name as it appears on your voter First Midd	registration. lleLast	Suffix				
Type of ballot Required in primary	3	☐ Democratic ☐ Republican	Non Partisan (will no	ot have ANY party candidates listed)				
Residential address Required Your ballot will be sent here unless you provide a temporary mailing address.	4	The residential or mailing address on y are registered to vote, contact your conditions. Address City	unty election office prior to su					
Temporary ballot mailing address Only if you are temporarily living outside the county and want your ballot sent to this address.	5	This address must be in a different coudisabled or detained in jail or other det Address ———————————————————————————————————	tention facility.					
Contact information Recommended	6	Phone number	Email address					
Voter identification Required Print carefully. This information will be used to verify your identity.		Date of birth (mm/dd/yyyy) AND —————————————————————————————————	OR Georgia Dr	imber or State Identification Card Number iver's License or Identification Card of acceptable identification below.				
Failure to provide accurate information may delay processing your application. You must provide your date of birth AND • a Georgia Driver's License or Identification Card number OR • a copy of an acceptable identification from the list in the instructions.	7	Instructions: • Make sure your identification on you ID card or document is visible. • Take a photo of your full completed application and submit it electronically to your county's election's office (addresses are online: elections.sos.ga.gov/ Elections/countyregistrars.do). You may also submit a hard copy of your application via U.S. mail or in person to your county elections office. • If your acceptable form of identification does not fit in this box, please attach a copy and submit it with your application.	Place iden if you did n driver's lice	atification here sot provide a Georgia ense or ID number				
Voter oath and signature Required Use a pen. No electronic signatures allowed.	8	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 in this application are true. By signing this oath, you are swearing that you are the voter requesting an absentee ballot. Signing this oath on behalf of another voter violates Georgia law and is punishable by a fine up to \$100,000, imprisonment for up to 10 years, or both. Voter, sign and date here (Required) Date (mm/dd/yyyy)						



Ballot to be:

electronically

by Registrars or Deputy

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Assisting a voter? If yes, the assistant must complete this section. Voter		By signing as assisting the voter, you are swearing under oath that the voter is entitled to assistance. Assisting a voter who is not eligible for assistance in completing this application violates Georgia law and is punishable by a fine up to \$100,000 or imprisonment for up to 10 years, or both. Assistant's name						
assistance is only allowed if the voter is illiterate	9							
or physically disabled.		Assistant's signature	х				Date (mm/dd/yyyy)	
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.	10	I swear that the are true and the grandparent, b son, daughter, son-in-law, dau father-in-law, b the age of 18 ar false statemer my relationshi law and is puni 12 months in ja	at I am either rother, sister, niece, nephev ghter-in-law, rother-in-law ad acknowled to n this app to the vote ishable by a f	the mother, fa aunt, uncle, sp w, grandchild, mother-in-law or sister-in-law dge that makin blication regal er violates Geo	her, ouse, , v of ng a ding rgia	I swear (or affirm) that the abo (check one) physically disabled temporarily residing out of the signature of authorized and elications. Relationship to voter	he county	
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 another application.	11	☐ 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)				My current status is (check one) MOS - Military Overseas MST - Military Stateside OST - Overseas Temporary Resident OSP - Overseas Permanent Resident (may vote for federal offices only) (Optional) By entering my email, I request that my absentee ballot be transmitted to me electronically.		
Acceptable forms of identification if you do not have a Georgia Driver's License or State Identification Card Number Identification with your photograph: • United States military identification card • Employee identification card issued by any branch, department, agency, or entity of the United States government, Georgia state government, or Georgia county, municipality, board, authority, or any other entity of the state of Georgia • Georgia voter identification card • United States Passport • Tribal identification card Documents that show your name and address: • Current utility bill • Paycheck • Other government document • Government check				Absentee be the election of mail of the fax				
Ballot	Date			Shown			For office use only	
Dist. Combo		eived				I certify that the above r	amed voter	
Precinct	recinc is			is eligible				
Ballot#		fiedVot		er Reg #		Registrar signature		
Ralletta he.		Delivered to vo		I □ Voted	n offic			

(municipal only)