

APPLICATION FOR ABSENTEE BALLOT FORM AV-R1

_____ COUNTY, ALABAMA

Return this application to:

General Voter Information - Please provide complete information so that we may verify your eligibility to vote.

Last Name (Please print)		First Name		Middle or Maiden Name		E-mail Address	
If you have moved since registering to vote, please update your voter registration record with the county board of registrars before proceeding with this application.							
Street Address (address where you are registered to vote; do not use PO box)						City	ZIP
Mail my ballot to the address where I regularly receive mail, if different from the street address provided above							
Precinct where you vote (name and/or location of your polling place)							
Date of Birth		Month	Day	Year		Driver's License Number	
Home Telephone Number ()		Work Telephone Number ()		<input type="text"/> <input type="text"/> <input type="text"/>		IF NO DRIVER'S LICENSE NUMBER Last 4 digits of Social Security number <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
				STATE		NUMBER	

For all registered voters

I hereby make application for an absentee ballot so that I may vote in the following election:

- | | |
|--|---|
| <input type="checkbox"/> Primary Election or Presidential Preference Primary | <input type="checkbox"/> Primary Runoff Election |
| Select one: <input type="checkbox"/> Democratic Party | Select one: <input type="checkbox"/> Democratic Party |
| <input type="checkbox"/> Republican Party | <input type="checkbox"/> Republican Party |
| <input type="checkbox"/> Other _____ | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Amendments Only | <input type="checkbox"/> Amendments Only |
| <input type="checkbox"/> General Election | <input type="checkbox"/> Special Election (specify) _____ |

- Absentee ballots for elections more than 30 days apart must be requested on separate applications, unless you are a member of the armed forces, or a spouse or dependent of such person, or you are a United States citizen residing overseas.
- An application submitted by a member of the armed forces, or a spouse or dependent of such person, or a United States citizen residing overseas, is valid for all county, state and federal elections in the current calendar year.

I am applying for an absentee ballot because (check one box):

- I will be out of the county or the state on election day.
- I have a physical illness or infirmity which prevents my attendance at the polls.
- Check this box if you are unable to access your assigned polling place due to a neurological, musculoskeletal, respiratory (including speech organs), cardiovascular, or other life-altering disorder that affects your ability to perform manual tasks, stand for any length of time, walk unassisted, see, hear or speak **and**:
- a) you are an elderly voter aged 65 or older; **or**
- b) you are a voter with a disability.
- I work a shift which has at least ten (10) hours that coincide with the polling hours at my regular polling place.
- I am enrolled as a student at an educational institution located outside the county of my personal residence, attendance at which prevents my attendance at the polls.
- I am a member of, or a spouse or dependent of a member of, the Armed Forces of the United States or am otherwise similarly qualified to vote absentee pursuant to the Uniformed and Overseas Citizens Absentee Voting Act, 42 U.S.C. 1973ff.

This application for an absentee ballot will be valid for all county, state, and federal elections held during this calendar year unless you specify an earlier expiration date here: _____

- I have been appointed as an election officer at a polling place which is not my regular polling place.

When I apply for this absentee ballot, I understand that my name will be stricken from the list of qualified electors and, when I cast this absentee ballot, I understand that I will not be entitled to vote at my regular polling place.

Voter's Signature	Complete this section if voter signs by mark →	Witness Signature
		Print Witness Name

The voter may hand this application to the Absentee Election Manager. The voter may also forward this application to the Absentee Election Manager by U.S. Mail [§17-10-4 and §17-10-12, Code of Alabama, 1975].

READ PENALTIES ON BACK