

**APPLICATION FOR ABSENTEE BALLOT****(ABS-1)**

For Election to be held: _____, 20_____

State Form 42106 (R13/1-04)
Indiana Election Commission (IC 3-11-4-5.1)**INSTRUCTIONS:** The voter (or the voter's power of attorney) must **SIGN** the application below. If you are applying as the voter's attorney in fact, a copy of the power of attorney must be attached. Complete and return this application to your county election board, so that the application is received at least 8 days before the election. You can return this application by FAX. **NOTE: Certain voters who registered by mail are required to provide additional person identification before voting an absentee ballot. Contact your county voter registration office for information if you think this may apply to you.**

Return by mail to this address: _____ Telephone (_____) _____ Fax(_____) _____

TO THE COUNTY ELECTION BOARD**FOR COUNTY ELECTION BOARD USE
DO NOT WRITE IN THIS SECTION**

Name (please print)		Township/Ward
Registration Address (Number and Street)	Telephone Number (Day)	Precinct
City/Town, State, Zip Code	Telephone Number (Evening)	City/Town Description
Date of Birth (mm/dd/yy)	Voter Identification Number <i>(Indiana issued driver's license number or state identification card number, OR if voter does not possess driver's license or state ID card, provide last 4 digits of social security number)</i> <i>(optional)</i>	Council District

**MAILING ADDRESS
(If different from residence address)****ADDITIONAL DOCUMENTATION**

Mailing Address (Number and Street)	Is applicant required to provide additional identification documentation to the county voter registration office but has not yet done so? <input type="checkbox"/> Yes <input type="checkbox"/> No
City/Town, State, Zip Code	

FOR PRIMARY ELECTION ONLY

In Indiana, you must request a major political party ballot to vote in the primary election. However, you may vote for school board offices or on referenda held at the same time as the primary without voting a political party ballot.

I apply for the ballots of the *(check one box)* Democratic Party **OR** Republican Party, a majority of whose candidates I expect to vote for in the general or municipal election; **OR** School Board Offices Only **AND/OR** Public Question Only**FOR GENERAL ELECTION ONLY**I apply for the ballots of Entire Ballot **OR** School Board Offices Only **AND/OR** Public Question Only

A. Voting by Mail
(Application due by midnight, ____/____/____)
Check one:

I expect to be absent from the county on election day.

I am a voter with disabilities. NOTE: If you are unable to mark the ballot or sign the envelope, you must vote before a traveling board or in the Clerk's office. Go to Box B or C.

I am a voter at least 65 years of age.

I expect to have official election duties outside of my voting precinct.

I am scheduled to work at my regular place of employment during the entire 12 hours that the polls are open.

I expect to be confined, due to illness or injury, or I expect to be caring for a confined person at a private residence, on election day.

B. Voting in the Clerk's Office
**(in Lake and Tippecanoe Counties, the
Election Board Office)**

*(Voting closes ____/____/____,
at noon)*

C. Voting by Traveling Board
*(Application due by ____/____/____ at noon
if hand delivered;
by ____/____/____ at noon
if mailed or faxed)*

I expect to be confined, due to illness or injury, or I expect to be caring for a confined person at a private residence, on election day.

I am a voter with disabilities and believe my polling place is not accessible to me.

VOTE ME AT THE FOLLOWING ADDRESS:

I request that the county election board authorize the traveling board to visit me outside the county at the place listed above.

Approved Denied

I affirm under the penalties of perjury:

1. I will have been a resident of the above precinct for thirty (30) days before the election or I am authorized to vote an absentee ballot in the precinct where I formerly resided under IC 3-10-10, IC 3-10-11, or IC 3-10-12;
2. I am a registered and qualified voter in the precinct; and
3. I reside at the address listed in the residence address section above.

Signature of voter _____ Date signed (month, day, year) _____/_____/_____