

ATTENTION PICKETT COUNTY ELECTION COMMISSION ATTENTION

I formally "Request an Absentee Ballot" based upon the following information

***** (Complete ALL 8 items) *****

1) PRINT NAME _____ Phone# _____

2) ADDRESS ON VOTER REGISTRATION

3) MAIL MY ABSENTEE BALLOT TO THIS ADDRESS

4) MY SOCIAL SECURITY # IS _____

5) DATE OF BIRTH _____

6) MY LEGAL REASON FOR VOTING ABSENTEE (Check one)

- _____ I am 60 years of age or older.
- _____ I will be outside of this county during all hours of early voting and Election Day.
- _____ I am a full time student (or the spouse of a student) at _____
(Name of college)
- _____ I have filed a doctor's statement stating I am medically unable to vote in person.
- _____ I reside in a licensed facility providing relatively permanent domiciliary care (Nursing Home)
- _____ I am hospitalized, ill, or physically disabled.
- _____ I am the caretaker of an ill or physically disable person.
- _____ I am a candidate.
- _____ I am an election official.
- _____ I am on jury duty in a state or federal court.
- _____ I have a commercial driver's license & will be out of county. CDL# _____
- _____ I am observing a religious holiday that prevents me from voting early or on Election Day.
- _____ Other _____

7) I WISH TO VOTE IN THE NOVEMBER 6TH 2018 ELECTION IN THE

GENERAL

8) SIGNATURE OF VOTER _____

All items (1-8) must be completed to make this request a "Properly Completed Application to vote by Mail" (Form deadline if properly completed is the close of business on the 7th day before the election)

FORWARD THIS INFORMATION TO: PICKETT COUNTY ELECTION COMMISSION
105 S. MAIN ST., ROOM 2
BYRDSTOWN, TN 38549

OR YOU MAY FAX THE COMPLETED FORM TO (931) 864-6362

FOR PICKETT COUNTY ELECTION OFFICE USE

(CIRCLE ONE) This Request has been: APPROVED REJECTED on _____ by _____
Voting District/Precinct _____ Administrator/Deputy Signature _____
Ballot Sent _____ Ballot Rcvd _____ Ballot Affidavit Signature _____