

# HOW TO FILL OUT AN ABSENTEE BALLOT REQUEST FORM



## APPLICATION FOR OFFICIAL ABSENTEE BALLOT

**PLEASE PRINT** (Failure to fill out this information may result in your application being rejected.)  
Date of Primary, Election, or Runoff: \_\_\_\_\_

**Must write in one election date for each application.**

Voter Registration #: \_\_\_\_\_ **Not required; ok to leave blank.**

**FIRST, download and print the application form:**  
[www.bit.ly/gamailapp](http://www.bit.ly/gamailapp)

**Date of Election: Required!** Write in either 8/11/20, 11/3/20, 12/1/20 or 1/5/21.

- Unless Section 10 applies to you (*see below*), you'll need to submit separate forms for each of these elections – you can submit separate applications for all the elections listed above NOW!

**Voter Registration #:** Not required. Leave blank if you don't have this information.

**Section 1:** Voter's name as it appears on the voter registration.

**Section 2:** Voter's registered address – you can confirm at [www.mvp.sos.ga.gov](http://www.mvp.sos.ga.gov)

- Did you move? Enter your new registration address in **Section 3** and check the box to update your registration.

**Section 3:** Leave blank UNLESS you want your ballot mailed to an address that is different than the address in **Section 2**.

- This address **MUST** be in a different county than the address in **Section 2** UNLESS:
  - voter is disabled, or
  - voter is detained, or
  - voter has checked the box in **Section 3** to update the registration address.

**Section 4:** Voter's birthdate.

**Section 5:** Required for 8/11/20 primary runoff. Not required for 11/3/20 election or 12/1/20 or 1/5/21 runoffs.

**Section 6:** Include a good phone number and email address. If the county has questions about the application, it will contact you with this information.

|  |    |   |
|--|----|---|
| <b>Voter name</b>  | 1  | First: _____ Middle: _____<br>Last: _____ Suffix: _____   |
| <b>Permanent address on file with county election office</b><br><small>This is the address at which you are registered OR the mailing address you have given your county elections office. Your ballot will be sent here unless you provide a valid address in Section 3.</small>  | 2  | Street: _____<br>City: _____ Zip: _____<br>County: _____  |
| <b>Temporary address where you want ballot sent</b><br><small>If you wish to receive your absentee ballot at an address other than the one in Section 2, fill it in here. This address must be in a different county than the county listed in Section 2 unless you are physically disabled, detained, or are updating your permanent address.</small> | 3  | Street: _____<br>City: _____ Zip: _____<br>County: _____<br><input type="checkbox"/> <b>Check here if your permanent address has changed and you want to update the address in Section 2 with the address you've provided in Section 3.</b>   |
| <b>Date of birth</b>   | 4  | Date of birth: (MM/DD/YYYY) _____   |
| <b>Type of ballot</b><br><small>Required in a primary or primary runoff</small>  | 5  | <input type="checkbox"/> <b>Leave this blank for November, December and January election applications. Must select one for August Primary Runoff.</b>   |
| <b>Contact information</b>   | 6  | To assist your county elections officials in contacting you in a timely manner if your application is incomplete, please provide the following information.<br>Phone number: _____ Email: _____   |
| <b>Signature or mark of voter</b><br><small>Required if voter fills out this application</small>   | 7  | Signature or mark of voter: _____<br>Today's date: (MM/DD/YYYY) _____   |
| <b>Signature of person providing assistance</b><br><small>Required only if voter is disabled or illiterate and received assistance completing this application</small>   | 8  | Signature of assis _____<br>Today's date: (MM/DD/YYYY) _____  |
| <b>Signature of person requesting ballot if not voter</b><br><small>Required only if Section 7 is left blank</small>   | 9  | Signature of requestor: _____<br>Relationship to voter: _____<br>I swear that the facts contained in this application are true and that I am either the mother, father, grandparent, brother, sister, aunt, uncle, spouse, son, daughter, niece, nephew, grandchild, son-in-law, daughter-in-law, mother-in-law, father-in-law, brother-in-law or sister-in-law of the age of 18 and swear (or affirm) that the above-named voter is<br>(check one) <input type="checkbox"/> physically disabled or <input type="checkbox"/> temporarily residing out of the county |
| <b>Eligibility to receive vote by mail ballots for the rest of the election cycle without another application?</b>   | 10 | <input type="checkbox"/> E - Elderly - I am 65 years of age or older <input type="checkbox"/> D - Disabled - I have a physical disability<br><input type="checkbox"/> U - U.S. Citizen living abroad at the time of the election<br><input type="checkbox"/> M - Mailed to voter's home by mail (if you are physically disabled, you may also be eligible for this option)<br>Email: (required) _____   |

**FOR OFFICE USE ONLY**

Dist: \_\_\_\_\_ Precinct: \_\_\_\_\_ Ballot #: \_\_\_\_\_

**Leave this section blank.**

Reason for Rejection: \_\_\_\_\_ Registrar Signature: \_\_\_\_\_

Ballot to be:  Mailed Electronically  Transmitted/delivered to voter in hospital by Registrars/Deputy  Voted in office (municipal only)

FORM #ABS-APP-18

**Sections 7, 8 and 9:** Signature can be handwritten or digital. At least one of the following signatures is required:

- If the **voter** is filling out the application, sign and date **Section 7**. Signature needs to "match" voter signature on file with office (this will be the signature on voter's Georgia Drivers' License, if voter has one).
- If you **assisted an illiterate or disabled** voter complete this application, sign and date **Section 8**. You do NOT have to be related to the voter. The voter shall leave a mark at **Section 7**.
- If you are **applying on behalf of a relative** who is temporarily living out of the county or is disabled, sign **Section 9** and list the relationship.

**Section 10:** Are you eligible to receive absentee ballots for every election this cycle without needing to reapply each time?

- If you are **65 or older, physically disabled, or living overseas**, mark the applicable box(es) here and you will automatically receive a ballot by mail for every election through January 2021.
- All other voters need to submit this application for every election in which they want to vote by mail.

**Submit completed signed application** to County Registrar's office via mail, email, fax, or in person – find where: [www.bit.ly/wheretosubmit](http://www.bit.ly/wheretosubmit)