

Complete and return to:

Application for Absent Voter's Ballot

Approved by: _____

CITY OF PLEASANT RIDGE
23925 WOODWARD AVENUE
PLEASANT RIDGE, MI 48069-1199

**YOU MUST SELECT ONE
BALLOT TYPE BELOW.
IF YOU DO NOT SELECT A
BALLOT TYPE, A BALLOT WILL
NOT BE ISSUED TO YOU.**

Name _____

Address _____
Pleasant Ridge, MI 48069

Check reason(s) why you are requesting ballot. If a reason is not checked for an election, an absentee ballot will not be issued for that election.

WARNING: A person who makes a false statement in this Declaration is guilty of a misdemeanor.

CHECK REASON FOR REQUESTING AN ABSENT VOTER BALLOT BELOW

- I am 60 years of age or older.
- I expect to be absent from the community in which I am registered for the entire time the polls are open on election day.
- I am physically unable to attend the polls without the assistance of another.
- I cannot attend the polls because of the tenets of my religion.
- I have been appointed an election precinct inspector in a precinct other than the precinct where I reside.
- I cannot attend the polls because I am confined to jail awaiting arraignment or trial.

ARE YOU A UNITED STATES CITIZEN?
 YES NO

**SELECT BALLOT TYPE HERE
YOU MUST SELECT
ONE BALLOT TYPE!**

I hereby request the ballot type marked below for this election. (You must select **one** ballot type below. If you do not select a ballot type, a ballot will **not** be issued to you.)

SELECT ONLY ONE BALLOT TYPE:

- REPUBLICAN PARTY**
Presidential Primary Ballot
- DEMOCRATIC PARTY**
Presidential Primary Ballot
- BALLOT WITHOUT
PRESIDENTIAL PRIMARY**

(if available) Note: This ballot choice is for voters not voting in the presidential primary who wish to vote on local proposals or candidates (if on ballot).

I declare the foregoing statement(s) to be true

**SIGN
HERE** ➔ **X**

_____/_____/_____
(Signature of Absent Voter) (Date)

NOTE: Michigan law requires that A.V. Ballots be sent to your registered address unless you are hospitalized, institutionalized, or at an address outside of your community. Complete the following **ONLY** if you want your ballot sent to an address outside of your community or to a hospital or other institution.

COMPLETE ONLY IF YOU WANT YOUR BALLOT SENT TO AN ADDRESS OTHER THAN YOUR REGISTERED ADDRESS

I will not be at my registered address, therefore send "Absent Voter Ballot" to me at:

(NAME) _____
(NO.) _____ (Street)
(City) _____ (State) _____ (Zip)

**PLEASE ADVISE PHONE
NUMBER FOR ANY INQUIRIES**
PHONE NO.
()

(Clerk's Use Only)

Filed: ____/____/____ Mailed: ____/____/____ Returned: ____/____/____
Wd/Pct: _____ Ballot No: _____ Clerk: _____

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(DO NOT DETACH)

SEE REVERSE SIDE FOR ADDITIONAL INSTRUCTIONS AND WARNINGS

Application to Vote – Poll List (Absent Voter)

WARD/ PRECINCT



DATE OF ELECTION



I hereby certify that I am a registered and qualified elector in the ward and precinct above and hereby make application to vote at the above indicated election.

Ballot No.: _____

____/____/____
Date of Birth (Month/Day/Year)

Voter No.: _____
(Poll Book)

Please Print Full Name

Are you a United States Citizen? Yes No

SIGN HERE

➔ **X**

Signature of Absent Voter

Approved – _____

(Registered Home address of Absent Voter)

(Inspector of Election)

INSTRUCTIONS TO ELECTION INSPECTORS – Place this in binder with other Applications to Vote

INSTRUCTIONS FOR APPLICANTS FOR ABSENT VOTER BALLOTS

- Step 1. After completely filling out the application, sign and date the application in the place designated. Your signature must appear on the application or you will not receive an absent voter ballot.
- Step 2. Deliver the application by 1 of the following methods:
 - (a) Place the application in an envelope addressed to the appropriate clerk and place the necessary postage upon the return envelope and deposit it in the United States mail or with another public postal service, express mail service, parcel post service, or common carrier.
 - (b) Deliver the application personally to the office of the clerk, to the clerk, or to an authorized assistant of the clerk.
 - (c) In either (a) or (b), a member of the immediate family of the voter including a father-in-law, mother-in-law, brother-in-law, sister-in-law, son-in-law, daughter-in-law, grandparent, or grandchild or a person residing in the voter's household may mail or deliver the application to the clerk for the applicant.
 - (d) In the event an applicant cannot return the application in any of the above methods, the applicant may select any registered elector to return the application. The person returning the application must sign and return the certificate below.

**CERTIFICATE OF AUTHORIZED REGISTERED ELECTOR
RETURNING ABSENT VOTER BALLOT APPLICATION**

I certify that my name is _____, my address is _____,
_____, my date of birth is ____ / ____ / ____;

that I am delivering the absent voter ballot application of _____
at his or her request; that I did not solicit or request to return the application; that I have not made any markings on the application; that I have not altered the application in any way; that I have not influenced the applicant; and that I am aware that a false statement in this certificate is a violation of Michigan election law.

Date _____ Signature _____

WARNING

A person making a false statement in this absent voter ballot application is guilty of a misdemeanor. It is a violation of Michigan election law for a person other than those listed in the above instructions to return, offer to return, agree to return, or solicit to return your absent voter ballot application to the clerk. An assistant authorized by the clerk who receives absent voter ballot applications at a location other than the office of the clerk must have credentials signed by the clerk. Ask to see his or her credentials before entrusting your application with a person claiming to have the clerk's authorization to return your application.