

REQUEST FOR MISSOURI MAIL-IN BALLOT

All mail-in ballots must be notarized.

I, _____, do hereby request a mail-in ballot for the

Printed name

_____ Election under Section 115.302, RSMo.

Election Date

For identification purposes: Date of Birth (MM/DD/YY) _____ or last four digits of Social Security number _____

If this is a primary election, please print the name of the political party ballot you wish to receive: _____

Address where I am registered to vote:

(Street Address)

(City, State, Zip Code)

Address where ballot is to be mailed

(Street Address or PO Box)

(City, State, Zip Code)

Telephone number: _____

(Include Area Code)

Email address: _____

I do solemnly swear that all statements made on this application are true to the best of my knowledge and belief.

Signature of Registered Voter

Date

*Mail this completed form to **Taney County Clerk PO Box 156 Forsyth Mo. 65653**. Missouri law requires that requests for mail-in ballots must be received by 5:00 p.m. on the second Wednesday prior to Election Day. If you registered by mail and this is your first time voting, you must provide a copy of either: (1) an ID issued by the Federal Government, state of Missouri, or a local election authority; (2) ID issued by a Missouri institution (public or private) of higher education; or (3) a current utility bill, bank statement, paycheck, government check or other government document that contains your name and address.*