

APPLICATION FOR ABSENT-VOTER BALLOT - NOVEMBER ELECTION

PLEASE PRINT

1. NAME OF VOTER \_\_\_\_\_  
Last First Initial

2. HOME ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_, UTAH \_\_\_\_\_  
Zip Code

3. DATE OF BIRTH \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
MO DAY YEAR

4. I am a qualified elector in full possession of my mental faculties, residing in Emery County at the above address and to the best knowledge and belief am entitled to vote by absentee ballot at the next election.

5. I hereby apply for an official November Election absentee ballot to be voted by me .

*Application Must be Signed to be Valid*

\_\_\_\_\_  
**SIGNATURE OF APPLICANT**

TODAY'S DATE \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
MO DAY YEAR

**INSTRUCTIONS:** Immediately complete all sections of this form, sign it and mail, fax or bring this application to: Emery County Clerk / Auditor  
P.O. Box 907 or 95 East Main  
Castle Dale, Utah 84513  
FAX # (435) 381-5183

**NOTE:** This application must be received by the Clerk / Auditor  
NOT LATER THAN:  
Friday before the election, or  
20 days before the election for persons who are overseas, or  
Monday before the election if the person is voting an absentee ballot in the Clerk / Auditor's office.

PLEASE MAIL MY ABSENTEE BALLOT TO THE FOLLOWING ADDRESS:

\_\_\_\_\_  
\_\_\_\_\_  
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**FOR OFFICE USE ONLY**

Voter ID#	Ballot Format	Ballot Number
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