

# Absentee Ballot Application Instructions

If you would like to have an absentee ballot mailed to you, PRINT legibly on the application below and SIGN where it says "Signature of Voter". All applications for an absentee ballot submitted by mail (or by a relative or guardian in person at the Election Board office) must be received in the office of the Jackson County Board of Election Commissioners by 5:00 P.M. on the Wednesday prior to the election. Pursuant to Missouri law (115.279), absentee ballots cannot be mailed if the application is received after this deadline.

For your application to be complete, you must provide the following:

- ◆ The date of the election
- ◆ The date of the application
- ◆ If it is a primary election you must state which political party ballot you would like
- ◆ The applicant's daytime phone number
- ◆ The name of the applicant as registered
- ◆ The address at which the applicant is registered
- ◆ The last 4 digits of the applicant's social security number
- ◆ The applicant's date of birth
- ◆ The reason for which an absentee ballot is needed
- ◆ The signature of the applicant

If you are going to be away from home and need a ballot mailed to a location other than your home address, fill out the section labeled "Mailing Address if different than Home Address".

**Note:** An Absentee Ballot Application may be forwarded to us by facsimile but must be followed by a hard copy with an original signature. If the original application is not in our office by 7:00 P.M. CST on the day of the election, the absentee ballot will NOT be counted. This application is good for the Jackson County Board of Election Commissioners only.

## ABSENTEE BALLOT APPLICATION (FOR REGISTERED VOTERS)

Mail This Application To:  
JACKSON COUNTY ELECTION BOARD  
POST OFFICE BOX 296  
INDEPENDENCE, MISSOURI 64051

Election Date \_\_\_\_\_ Date of Application \_\_\_\_\_

Party Primary Election, Indicate Party \_\_\_\_\_ Phone Number \_\_\_\_\_

Print Name \_\_\_\_\_  
FIRST MIDDLE NAME/INITIAL LAST

Registered Address \_\_\_\_\_  
NUMBER DIRECTION STREET APT CITY ZIP

Last 4 Digits of Social Security Number \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_  
(MM/DD/YYYY)

### OFFICE USE ONLY

Cert. # \_\_\_\_\_

OFFICE  Township \_\_\_\_\_  
Precinct \_\_\_\_\_

MAILOUT  Style \_\_\_\_\_

Color \_\_\_\_\_

Ballot # \_\_\_\_\_

I expect to be prevented from going to the poll on election day due to the following checked reason:

- \_\_\_\_\_ Absence on election day from the jurisdiction of the election authority in which I am registered;
- \_\_\_\_\_ Incapacity or confinement due to illness or physical disability, including caring for a person who is incapacitated or confined due to illness or disability;
- \_\_\_\_\_ Religious belief or practice;
- \_\_\_\_\_ Employment as an election authority or by an election authority at a location other than my polling place;
- \_\_\_\_\_ Incarceration, although I have retained all the necessary qualifications for voting.

MAILING ADDRESS IF DIFFERENT THAN HOME ADDRESS:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
CITY STATE ZIP

### MISSOURI ELECTION LAW 115.279

No application for an absentee ballot submitted by mail or by a guardian or relative after 5:00 p.m. on the Wednesday immediately prior to the election shall be accepted by any election authority. No application for an absentee ballot submitted by the applicant in person after 5:00 p.m. on the day before the election shall be accepted by any election authority.

Signature of Voter \_\_\_\_\_

Signature of Guardian or relative; or Witness, If signed with an "X" \_\_\_\_\_ Relationship to applicant \_\_\_\_\_