## ARKANSAS APPLICATION FOR ABSENTEE BALLOT Revised 09/2021

			FOR OFFICE USE ONLY
то со	OUNTY CLERK:	DATE:	
			REGISTRANT ID:
			PRECINCT:
INCTD	<u>UCTIONS TO VOTER:</u> PLEASE MAKE <u>ON</u>	I V ONE SEI ECTION EOD SECTIONS O	NF (1) THEOLICH FOLID (4)
11011			NE (1) THROUGH FOUR (4).
1.	PLEASE SELECT A REASON FOR REQUES  I will be unavoidably absent from my polling		
	<ul> <li>I will be unavoidably absent from my polling site on Election Day, OR</li> <li>I will be unable to attend the polls on Election Day because of an illness or physical disability, OR</li> </ul>		
	☐ I am a resident of a long-term care or residen		, or
2.			
	☐ I currently reside outside of the county in wh	ich I am registered to vote.	
	I am a United States citizen residing outside of the territorial limits of the United States (UOCAVA).		
	☐ I am an active service member of the United States armed services (UOCAVA).		
	I am a spouse or dependent of an active service member of the United States armed services (UOCAVA).		
3.	PLEASE SELECT THE ELECTION IN WHICH YOU WISH TO CAST AN ABSENTEE BALLOT:		
	Preferential Primary/Nonpartisan Judicial General (held in the spring of even-numbered years).  Party Preference (Circle One): Democratic Republican Nonpartisan (You will be sent a Judicial ballot only)		
	November General Election/Nonpartisan Jud		i wili be sent a Judiciai banot <u>omy)</u>
	☐ Annual School Election.	iciai Runoii.	
	□ Special Election to be held on	(Date).	
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	You may qualify for:		
	<ul> <li>□ All elections for one calendar year (i.e., today's date through December 31st of the current year).</li> <li>□ In order to qualify for this option, you must be a voter with a disability, in a long-term or residential care facility, or living outside of the county in which you are registered to vote.</li> <li>□ All elections through the next Federal General Election Cycle.</li> </ul>		
		s option, you must be a UOCAVA voter (See Sec	ction 2 above).
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4.	PLEASE SELECT HOW YOU WISH TO RECEIVE YOUR BALLOT:		
	☐ I will pick up my ballot from the office of the county clerk.		
		My email address is:	
	☐ Mail. Please send my ballot to the following	address:	
	<del></del>		
	☐ Picked up via Designated Bearer, Administrator, or Authorized Agent:		
	Printed Name of Bearer/Administrator/Agent	Signature of Bearer/Administrate	or/Agent
	<b>Note:</b> A designated bearer may obtain or deliver absentee ballots for no more than two (2) voters per election and may only do so within the 15 days before a school election, special election, preferential primary election, or general election OR the 7 days before a runoff election. A bearer,		
administrator, or authorized agent must provide a current and valid photo ID to the county clerk and must si			
	up or delivering an absentee ballot.		
The infer	mustian I have mustided in tune to the heat of my bream	ledge under nevelty of nevirons. If I have presided f	also information. I may be suffer of noninguity
	rmation I have provided is true to the best of my know. ect to a fine of up to ten thousand dollars (\$10,000) or		
	that I am registered to vote, and that I am the person w		, , , , , , , , , , , , , , , , , , ,
Residential Address of Absentee Voter		Date of Birth of Absentee Voter	
City, Stat	e, and Zip Code	Phone Number of Absentee Voter	
,,	*		

Signature of Absentee Voter

Printed Name of Absentee Voter