Application for a Ballot by Mail

If someone helps you complete this form or mails, emails or faxes this form for you, that person must complete the Witness/Assistant Box 6 below. If you email or fax this form to the Early Voting Clerk, you must also send the original hardcopy to the Early Voting Clerk. If you are faxing or emailing this form on or near the deadline to apply for a Ballot by Mail, you must send the original hardcopy so that the Clerk receives it no later than the fourth business day after the day the Clerk received your email or fax. Original signatures are required on both the fax or email image and the physical hard copy. Electronic signatures are not permitted. THE HARDCOPY OF THIS APPLICATION MUST BE RECEIVED BY THE EARLY VOTING CLERK AND IMEET ALL LEGALLY REQUIRED DEADLINES. Please read the instructions on the back of this form completely. If you have any questions, please call the Early Voting Clerk in your county of registration or the office of the Texas Secretary of State at 1-800-252-8683 or log on to www.sos.texas.gov for a list of County Early Voting Clerks and their email and physical addresses

Voter Information: Please print all information clearly and legibly		residuação tos diferes codinty c	arry voting cier	Sand their email	and physical addresses.	
N.				1 2000		
Name:		Middle	- Autou		Suffix (Jr., Sr.)	
Address:					Surrive fair, Surf	
Residence Address as shown on your Voter Registration Certificate	Cit		State	Zip Code	Apt. # (if any)	
Optional Information Section: Providing this information is helpful to the Early Voting Clerk, but	it not r	equired.		- F	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
VUID#: Pct#-						
VOID#: Pct#:		765900	Date of Birth: _	/		
Email:			Telephone#:(_)		
2. Mail my Ballot to:						
☐ My Residence Address (as listed on my Voter Registration Certificate)						
☐ Other Address - You may use the Other Address line only if the other address fits one of the categorie	s below	<i>t</i> .				
Address My Other Address is: (Check one)	Ci	У	State	Zip Code	Apt. # (if any)	
☐ The mailing address listed on my Voter Registration Certificate						
 Address Outside the County (voters absent from the county) Hospital, Nursing Home, Long-Term Care Facility, Retirement or Assisted Living Center or a Relati 	va.				# P + 6 L + 1 · 1	
☐ Address of the Jail/Civil Commitment Facility or a Relative	ve				(Indicate Relationship)	
32.37					(Indicate Relationship)	
3. Reason For Voting by Mail:						
☐ 65 Years of Age or Older ☐ Disability (as defined in Texas Election Code 82.002(a), see instruction on reverse) By checking this b	ov "I nEl	Same Africa I have a state of the state of				
place on election day without a likelihood of needing personal assistance or of injuring my health."	ox, ran	irm that i have a sickness or physic	cal condition that	prevents me from a	appearing at the polling	
☐ Expected to give birth within three weeks before or after Election Day						
Expected Absence from the County (You may apply for a ballot for one election and its resulting rund	off, if yo	ur dates of absence from the coun	ity include both el	ections)		
Date you can begin to receive mail at your out of county address://			dence address:	1	/	
Confined in Jail or Involuntary Civil Commitment (You may only apply for a ballot for one election and	d any re	sulting runoff)				
4. Send me a Ballot for the Following Elections:						
☐ Annual Application		Uniform Election Dates				
Send me a ballot for all Elections in this voting year (January December) Annual Applications		☐ November Election ☐ N	/lay Election (not	a primary runoff)		
only available for voters 65 and older and voters with disabilities. You must select a party if you wish to vote in a primary. Select only one party's primary and its resulting runoff.		Any Resulting Runoff 🔲 O		on: {Name or Date	of Special Election, if known)	
Primary Election (even numbered years only)	OR	Primary Election (even number Democratic Primary A				
☐ Democratic Primary ☐ Any Resulting Runoff		Republican Primary A				
☐ Republican Primary ☐ Any Resulting Runoff		(Voters who are absent from th	e county or confi	ned in jail/civilly cor	nmitted may only apply for	
☐ Do Not Send me a Primary Bailot		one election and its resulting ru	inoff.)			
5. Sign Here:						
"I certify that the information given in this application is true, and I understand that giving	ng fals	e information in this applicati	ion is a crime."			
x			D-4			
If applicant is unable to sign or make a mark (in the presence of a witness), the witness must complete t	he witn	ess portion in Box 6 below. The sig	Date: nature or mark of	the voter in the bla	nk above must be an original	
signature made with a pen and ink. Electronic signatures are not permitted.						
6. If someone helps you complete this form or mails, emails or faxes the form for yo	u, tha	t person must complete the	section below	v. *		
Instructions for Witnesses and Assistants: See back of this form for the definitions of Witness and Assi			1-11111			
Check one or both boxes below if you served as a Witness, an Assistant or both. All information below if the applicant is unable to make a mark, you must check this box and complete all information below.	w Dor	at be completed!				
Witness – If you are acting as a Witness to the applicant's signature or mark or signing on the applicant.	int's bel	half, you must state your relationsh				
Assistant – If you assisted the applicant in completing this application in the applicant's presence or mailed/emailed/faxed the application on behalf of the applicant. (Indicate Relationship)						
Failure to complete this section is a Class A Misdemeanor if applicant's signature was witnessed or a	pplican	t was assisted in completing this	application.			
X	_					
Signature of Witness/Assistant	Print	ed Name of Witness/Assistant				

Street Address	City	<i>-</i>	State	Zip Code	Apt.#(ifany)	

Este formulario está disponible en Español. Para conseguir la versión en Español favor llamar sin cargo al 1-800-252-8683 a la oficina del Secretario del Estado o la Secretaria de Votación Adelantada.

Instructions for Application for Ballot by Mail

BOX 1:

- Name: Please give your full name as it was provided to the Voter Registrar and include any suffixes like Jr., Sr., or III.
- Date of Birth: Not a requirement but it is helpful to determine identity when voters have common names.
- Address: Give your full residence address as shown on your Voter Registration Certificate.
- VUID and Precinct Number: If you know your VUID and/or Precinct number, you may provide it, but it is not a
 requirement.
- Phone Number and Email Address: Providing your telephone number and email is not required but is extremely
 helpful to the Early Voting Clerk to clarify any information on this application.

BOX 2:

Your ballot must be mailed to the address where you are registered to vote or the mailing address listed on your Voter Registration Certificate. There are some exceptions that allow you to have your ballot mailed to a different location.

- If you are voting by mail because you are 65 or have a disability Your ballot can be mailed to a hospital, nursing
 home, long-term care facility, retirement or assisted living facility or a relative.
- If you are absent from the county -- Your ballot must be mailed to an address outside the county.
- If you are confined in jail or involuntarily civilly committed Your bailot can be mailed to the address of the jail/ commitment facility or a close relative.

BOX 3

The State of Texas requires that you provide a reason for voting by mail. Place a checkmark in the box that best describes your reason for voting by mail.

- If you choose 65 Years of Age or Older, you must turn 65 no later than Election Day.
- If you choose Disability, your disability must meet the definition of a disability as described in Section 82.002(a) of the Texas Election Code.
- If you choose Confinement for Childbirth, you expect to give birth within three weeks before or after Election Day.
- If you choose Expected Absence from the County, you must expect to be absent from the county on Election Day
 and during the hours of early voting by personal appearance or the remainder of the early voting period after you
 submit your application. The ballot must be mailed to an address outside the county and you must provide the
 dates that you will be absent from the county.
- If you choose Confined in Jail/Involuntary Civil Commitment under Chapter 841 of the Health and Safety Code,
 you must be legally eligible for Early Voting by Mail. At the time your early voting ballot application is submitted,
 you are either (1) confined in jail serving a misdemeanor sentence for a term that ends on or after Election Day;
 (2) pending trial after denial of bail;
 (3) without bail pending an appeal of a felony conviction;
 (4) pending trial or appeal on a bailable offense for which release on bail before Election Day is unlikely or
 (5) you are involuntarily civilly committed.

ROX 4

Please select the election(s) for which you are applying.

Annual Application — Only voters who are 65 or older or who have a disability are eligible to apply for an Annual ballot by mail. An Annual ballot by mail will provide you with a ballot for all the elections in a calendar year for which you are eligible. Your Annual Application may be forwarded to other entities holding elections in which you are eligible to vote. This means that you may receive a ballot for those other elections in addition to the ballot you requested with this application. If you do not select any elections in 80x4, your application will be considered an Annual Application if your reason for voting by mail was 65 Years of Age or Older or Disability.

DO NOT REMOVE PERFORATED TABS. Moisten here and fold bottom to top to seal.

BOX 5

Sign and date your application. If you are unable to sign because of a physical disability or illiteracy, the application may be signed for you by a witness. The witness must be in the presence of the voter in order to act as a witness.

BOX

- Witness The witness must place a checkmark in the Witness Box indicating you were unable to make your
 mark. The witness must state his or her relationship to you. If the witness is not a relative, the witness must
 state that on the line provided. The witness must sign and provide his or her printed name and residence
 address. It is a Class B Misdemeanor to act as a witness for more than one application in each election or act as
 a witness for more than one annual ballot by mail application in a calendar year.
- Assistant If a person (other than a close relative or person registered to vote as the same address) assists
 you in completing this application; or mails, faxes or emails this application on your behalf, the assistant must
 complete Box 6. The assistant must sign and provide his or her printed name and residence address. An
 assistant commits a Class A Misdemeanor if he or she provides assistance without providing the information
 required in Box 6.

DEADLINE TO APPLY:

Your application must be received by the Early Voting Clerk not later than the 11th day before Election Day. If the deadline falls on a weekend or holiday the deadline moves to the first preceding business day. An application may be submitted anytime in the calendar year but not later than the 11th day for the election in which you wish to vote. Annual Applications - If you submit an Annual Application (only available for voters 65 and older and voters with disabilities), within 60 days of an election that takes place in the following calendar year, your applications and only when there is an election within 60 days of the date the Annual Application was received by the Early Voting Clerk in the preceding year.

SUBMITTING THE APPLICATION:

The application must be submitted by one of the following methods:

- . In-Person Only the applicant may submit his or her own application to the Early Voting Clerk.
- By Mail The application may be submitted via the U.S. Postal Service.
- Common or Contract Carrier The application may be submitted via a bona fide, for profit carrier.
- Fax Transmission Please contact your Early Voting Clerk or the Secretary of State for fax numbers.
- By email The application may be submitted via email. Please contact your Early Voting Clerk or the Secretary of State for email addresses.

The fax or email must reach the Early Voting Clerk's office no later than the close of regular business or 12:00 noon, whichever is later on the 11th day before Election Day.

IF YOU FAX OR EMAIL THE APPLICATION YOU MUST ALSO PHYSICALLY SEND THE ORIGINAL TO THE EARLY VOTING CLERK SO THAT IT IS RECEIVED NO LATER THAN THE FOURTH BUSINESS DAY AFTER IT WAS RECEIVED BY FAX OR EMAIL.

AFFIX FIRST CLASS POSTAGE

FROM:		
-	- 19450A	
		OFFICIAL A TOTAL STATE OF THE U.S. Postal Savies &

TO: EARLY VOTING CLERK