APPLICATION FOR OVERSEAS ABSENT VOTER'S BALLOT

(For civilian/non-uniformed services absent voter) R.C. 3511.02(A)
Use of this form by applicant is optional; however, your signed
application must contain all the information requested below.

I, _____, a qualified elector, hereby apply for an Overseas Absent
(Printed name of voter)

Voter's Ballot. My qualifying voting residence address in Ohio is:

_____, _____, Ohio, _____.
(Street and Number, or Rural Route Number)   (City or Village)   (Zip code)

What is your birth date? (required)   _____/_____/_____
(month)   (day)   (year)

Identification in the form of ONE of the following must be provided below or accompany this application:

☐ Your Ohio driver's license number _____, **or**
(begins with two letters followed by six numbers)

☐ The last four digits of your social security number _____, **or**

☐ **Copy** of a current and valid photo identification, a military identification, or a current (within one year) utility bill, bank statement, government check, paycheck, or other government document (other than a voter registration notification mailed by a board of elections) that shows your name and current address.

In which election do you wish to vote?

Check ONLY one (A separate application must be completed for each election)**:**
1. **Primary Election**: _____
(year)

☐ Constitution   ☐ Libertarian
☐ Democratic   ☐ Republican
☐ Green   ☐ Socialist   ☐ Nonpartisan or issues only

2. ☐ **General Election** _____   3. ☐ **Special Election** _____
(year)   (month and year)

Mail ballot to: **Or, Fax ballot to:**

_____   _____
                                                  (Fax Number, including area code and/or country code)
_____   **Or, E-mail ballot to:**

_____   _____
                                                  (E-mail address)

I hereby declare, under penalty of election falsification, I am a qualified overseas voter as defined in federal law (42 U.S.C. 1973ff-6) and the statements above are true to the best of my knowledge and belief. I understand that if I do not provide the requested information, my application cannot be processed.

X_____   _____
(Signature of Voter)   (Date Signed)

WHOEVER COMMITS ELECTION FALSIFICATION IS GUILTY OF A FELONY OF THE FIFTH DEGREE