ARKANSAS APPLICATION FOR ABSENTEE BALLOT

Revised 09/2021

TO COUNTY CLERK: Saline County Clerk

215 N. Main Street, Suite 9 Benton, AR 72015

FOR OFFICE USE ONLY				
DATE:				
REGISTRANT ID:				
PRECINCT:				

INSTR	.UC1	<u>TIONS TO VOTER</u> : PLEASE MAKE <u>ONL</u> Y	ONE SELECTION FOR SECTIONS ONE (1) THROUGH FOUR (4).
1.	PL	EASE SELECT A REASON FOR REQUESTI	ING AN ABSENTEE BALLOT (SELECT ONE):
		I will be unavoidably absent from my polling si	
		I will be unable to attend the polls on Election I	Day because of an illness or physical disability, OR
		I facility licensed by the state.	
2.	PL	EASE SELECT FROM THE FOLLOWING O	TIONS CONCERNING YOUR RESIDENCE (SELECT ONE):
		I currently reside within the county in which I a	m registered to vote.
		I currently reside outside of the county in which	I am registered to vote.
			the territorial limits of the United States (UOCAVA).
		I am an active service member of the United Sta	
			member of the United States armed services (UOCAVA).
3.	PL		YOU WISH TO CAST AN ABSENTEE BALLOT (SELECT ONE):
		Preferential Primary/Nonpartisan Judicial Gene	
		Party Preference (Circle One): Democratic	Republican Nonpartisan (You will be sent a Judicial ballot only)
		November General Election/Nonpartisan Judici	al Runoff
		Annual School Election	(7)
		Special Election to be held on	(Date)
	Vο	u may qualify for:	
	10		i.e., today's date through December 31st of the current year).
		• `	on, you MUST be a voter with a disability, in a long-term or residential
			f the county in which you are registered to vote.
		☐ All elections through the next Feder a	
		_	on, you MUST be a UOCAVA voter (See Section 2 above).
		in order to quanty for this opti	on, you MOST be a COCATA Total (See Section 2 above).
4.	PL	EASE SELECT HOW YOU WISH TO RECE	IVE YOUR BALLOT (SELECT ONE):
		I will pick up my ballot from the office of the co	ounty clerk.
		Email (available for UOCAVA voters only). M	
		Mail. Please send my ballot to the following add	dress:
		Picked up via Designated Bearer, Administrator	or Authorized Agent:
		Tieked up via Beoignated Bearer, Transmistrator	, of Francisco Figure
	Davis	nted Name of Bearer/Administrator/Agent	Signature of Bearer/Administrator/Agent
	Prii	nted Name of Bearer/Administrator/Agent	Signature of Bearer/Administrator/Agent
	Not	te: 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
			primary election, or general election OR the 7 days before a runoff election. A bearer,
			d valid photo ID to the county clerk and must sign the register, under oath, when picking
	up (or delivering an absentee ballot.	
The info	rmati	ion I have provided is true to the best of my knowled	ge under penalty of perjury. If I have provided false information, I may be guilty of perjur
			nprisonment for up to ten (10) years, or both, under federal law. I certify under penalty o
perjury	that I	am registered to vote, and that I am the person who	is registered to vote.
Resident	ial Ad	ldress of Absentee Voter	Date of Birth of Absentee Voter
City, State, and Zip Code			Phone Number of Absentee Voter
city, ota	ic, ail	a Zip Code	Those runned of Ausenice votes
D : . 12	T	CAL	C' (CAL , V)
Printed Name of Absentee Voter			Signature of Absentee Voter

YOU MAY RETURN THIS APPLICATION TO THE SALINE COUNTY CLERK VIA MAIL, FAX, OR EMAIL.