

APPLICATION FOR OFFICIAL ABSENTEE BALLOT

§§115.279, 115.283, 115.284, 115.427 PL 107-252

STATE OF MISSOURI }
COUNTY OF Bates } ss.

Date _____ 20 _____

I, _____, the undersigned applicant, do hereby apply for an Absentee Ballot to be voted by me at the _____ Election to be held on the _____ day of _____ 20 _____.

My home address in said county is _____ ;

I expect to be prevented from going to the polls to vote on election day due to:

- Absence on election day from the jurisdiction 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;
- Military
- Certified participation in the address confidentiality program under Sections 589.660 to 589.681 because of safety concerns
- 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 of voting.

Mail Ballot to me at the following address: _____

_____ (Show Party in Primary) _____ (Signature of Applicant) Mark
 _____ (Father, Mother, Spouse or Next Kin)

Please return completed form to the Bates County Clerk's Office, 1 N. Delaware, Butler, MO 64730
E-mail - bates @sos.mo.gov Fax - 660-679-9922

Applications must be in the Clerk's Office by 5:00 p.m. on the Wednesday prior to the Election.

Date Ballot mailed or delivered _____, 20 _____.

Sent by _____ County Clerk/Election Authority