APPLICATION FOR OFFICIAL ABSENTEE BALLOT

(IN PERSON, BY MAIL, OR BY FAX)

(Section 115.279, 115.287)

STATE OF MISSOURI }
COUNTY OF Bates } ss.

Date _____ 20 18

TO THE CLERK OF THE COUNTY COMMISSION:

I, _____, the undersigned applicant, do hereby apply for an Absentee Ballot (or Ballots) to be voted by me at the Municipal Election to be held on the 3rd day of April 20 18.

I am a resident of the _____ Precinct in the Township of _____ or the _____ Precinct in the City or Town of _____. County of Bates and State of Missouri and am lawfully entitled to vote in said Precinct at said Election.

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(s) to me at the following address: _____

_____

_____ _____ ☐ **Mark**

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

Date Application Received _____, 20 _____.

How made: ____ **In person,** ____ **By mail,** ____ **By fax**

Date Ballot (or Ballots) mailed or delivered _____, 20 _____.

Sent by _____ **County Clerk/Election Authority**

By _____ **Deputy**

Please return to Bates County Clerk, 1 N Delaware St, Butler, Mo 64730