West Virginia Absentee Ballot Application

You must complete this form in your own handwriting. Exception: Voters eligible for an electronic absentee or who receive assistance because of illiteracy or physical disability are not required to complete this form in their own handwriting. See page two (2) for detailed instructions.

2	Your current WV residence address and date of birth Where should we mail your ballot?	Street (not P.O. Box) City Address City					_ County:		
2	and date of birth Where should we	Address		State _WV_	Zip				
						Code	_ Date of Birth	//	
		City					Phone		
				State	Zip C	ode	-		
		Uniformed and overseas	voters should	apply using the Fed	eral	Postcard Application	available at www.f	vap.gov.	
4	Eligibility: Choose <u>one</u> from section A, B, <u>or</u> , C	□ Immobility due to a □ Incarceration or de (including any period □ Employment which □ I am a participant is your application to th □ The county early vo □ Personal business of □ Attendance at colle your county of resides □ Temporarily living of ballot must be mailed □ Temporarily living of less. If selected, your B. □ I am applying for a mail-in absentee vot If selected, enter selected, you mus If selected, you mus If selected, enter your	to: Illness, injury or other medical reason which keeps me confined. Ilmmobility due to advanced age or a physical disability. Incarceration or detention in jail or home. I am not under conviction of any felony, of treason or of bribery in ar (including any period of probation or parole). If selected, you must complete the statement on number nine (9) of Employment which because of hours worked and distance from the county seat makes voting in person imposs I am a participant in the Address Confidentiality Program (ACP) with the Office of the Secretary of State. If select your application to the Secretary of State's Office. The county early voting office and my polling place are inaccessible to me due to my physical disability. Personal business or travel. If selected, your ballot must be mailed outside of your county of residence. Attendance at college, university, or other place of education or training. If selected, your ballot must be mailed your county of residence. Temporarily living outside of the county due to serving as an elected or appointed federal or state officer. If seleballot must be mailed outside of your county of residence. Temporarily living outside of the county due to a temporary assignment by my employer for a specific period or less. If selected, your ballot must be mailed outside of your county of residence. I am applying for an electronic absentee ballot due to a physical disability that prevents me from voting by in selected, enter your email address: I am a first responder applying for an electronic absentee ballot due to being called away on duty to responder emergency outside my county of residence, which prevents me from voting by in-person and mail-in absentee If selected, enter your email address: If selected, enter your email election enter the election and 5:00 p.m. on the day before the e						n election this form. ible. ited, send doutside of ected, your four years or n-person and location.
5	Declaration	Elections: Federal/State/County City/Town (if separate from county election, submit to your city/town clerk or recorder) I do hereby certify the in am qualified and registe false statement on this a	General Special formation givered to vote in application is a	l'm registered as: Democrat Republicar Mountair Libertariar None of the above en above is true to this county. I under	\rightarrow \rightarrow \rightarrow \rightarrow \rightarrow the larstan	Democrat Republican Non-Partisan or Lib Non-Partisan or rec Democrat Democrat Mountain (check Dest of my knowled d that I must vote in	ountain (check with control of the c	ounty) nere: ublican ertarian (check he address givenderstand that uprisonment.	en, and that I t making a f I require
6		assistance with my ballo on number 7 of this form Signature/mark of voter Signature of witness to vote Reason for assistance (if	i. (if mark, witn oter's mark (if	ess must sign) X				Date: _	ed the oath

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7	Oath of Voter's Assistant (if needed)	I, a person giving assistance to the voter above and signing below, hereby swear or affirm, under penalty of law, that: I will not in any manner request, persuade or induce the voter I am assisting into voting for someone other than the candidate of the voter's choice; and I will not keep or make any memorandum or entry of anything, directly or indirectly, nor reveal to any person the name of any candidate or issue voted for by the voter or which ticket he or she voted except when required pursuant to law to give testimony as to the matter in a judicial proceeding. Signature of person assisting voter						
8	If you moved within your county or changed your name, enter your previous information	Previous Name (if applicable) Last Previous Residence Address (i Street (not P.O. Box) City	Firstf applicable)	County:	Suffix			
9	To be completed for applicants voting absentee because of incarceration or detention	application will be confined in	the county or city jail or oth the date of the election, and	ereby declare that the applicant whose signature detention facility or home confinement on the signature of the signature of the son, bribery in the signature of the signature	the day an election, or felony.			

Instructions

- Complete steps one (1) six (6) on page one (1) of this form in your own handwriting. Exception: Voters eligible for an electronic absentee or who receive assistance because of illiteracy or physical disability are not required to complete this form in their own handwriting. Remember to sign your form on page one (1), number six (6).
- Complete steps seven (7), eight (8), and/or nine (9) on page two (2) of this form if they apply to you:
 - A person assisting a voter must sign the oath on number seven (7).
 - If you moved to a different address within your county or changed your name and have not updated your registration, enter your previous information in number eight (8).
 - o If voting absentee because of incarceration or detention, the Statement of Sheriff, Chief of Police or Authorized Deputy in number nine (9) of this form must be completed.

How to Submit Your Application

- If you are applying for a federal/state/county election, mail, fax, or email your application to your county clerk.
- If you are applying for a city/town election that is separate from your county election, mail, fax, or email your application to your city/town clerk or recorder.
- Visit GoVoteWV.com for contact information.

When to apply

- You must apply separately for each election. The application period begins not earlier than January 1 of an election year or 84 days preceding the election, whichever is earlier.
- If you are applying for a Federal/State/County election, your county clerk must <u>receive</u> your application by the sixth (6th) day before the election.
- If you are applying for a city/town election that is separate from your county election, your city/town clerk or recorder must <u>receive</u> your application by the sixth (6th) day before the election.
- If you are an eligible first responder called away on duty, you may apply to vote an electronic ballot beginning the thirteenth (13th) day before the election, and not later than 5:00 p.m. on the day before the election.



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The Office of the Secretary of State State Capitol Building, 157-K Charleston WV 25305

Phone 304-558-6000 Toll free 866-767-8683

E-mail: elections@wvsos.gov

www.wvsos.gov