

ABSENTEE BALLOT REQUEST

STATE OF NEVADA

1.	First Name	Middle Name	Last Name
2.	Address Where You Live in Nevada	City	State Zip Day-time phone
3.	Address For Mailing the Absent Ballot (if different from #2)	City	State Zip
4.	Social Security No/Nevada Driver's License No. ID No. (List One) Last four digits of Social Security only	NV Voter Registration Card No. (If Known)	
5.	Mark Election(s) that you are requesting an absent ballot: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special		
6.	Please sign and date below: _____ (Signature) _____ (Date)		
WARNING		FOR OFFICE USE ONLY	
You may NOT vote an absent ballot if: 1) you registered to vote by mail; and 2) you have never voted at the polls in your county of residence. Exception: You may vote an absent ballot if you get this form notarized	BALLOT NO.	DATE MAILED	DATED RETURNED
	Primary:		
	General:		
	Special:		
	Precinct #	Party Affiliation	
	Ballot Code:	Affidavit No.	

Please complete this form and return to:
Elko County Clerk
550 Court Street, 3rd Floor
Elko, Nevada 89801

NOTICE:

This is a request for an absent ballot. By completing and returning this form to the Elko County Clerk, you are submitting a request for an absent ballot.

Your application for an absent voter's ballot must be received by the Elko County Clerk by 5 p.m. the Tuesday prior to any election. If you receive an absent voter's ballot, you may vote only by absent ballot unless you surrender your absent ballot or provide identification and sign an affidavit declaring you have not voted in the election.