LF 41

APPLICATION FOR ABSENTEE BALLOT

Voter Code	Ballot Style	Enter Voter's Consecutive Number No_____	Judge's Initials	Enter Voter's Serial Number
For Election Authority's Use Only		For Judge's Use Only		

To be voted at the _____ Election in the County of _____

and State of Illinois in Precinct _____ on _____, 20____.
(Name and Number)

I state that I am a resident in the precinct specified above, residing at _____; that I
(Complete Residence Address)

have lived at said address for 30 days or more preceding this election, that I am lawfully entitled to vote in such precinct at said election to be held therein and I will be unable to vote in person at the polls of such precinct for the following reason; (check one)

- ☐ I expect to be absent from my county of residence. (____ I am a Federal or State employee)
- ☐ I expect to be temporarily absent from the country.
- ☐ I shall be serving as a Judge of Election outside my precinct of residence. _____ Precinct No. _____
  (Precinct Serving In)
- ☐ I shall be observing a religious holiday in accordance with the tenets of my religion.
- ☐ I shall be performing official election duties for _____ _____
  or the State Board of Elections. (Election Authority) (Location)
- ☐ I shall be performing election law enforcement duties in the employment of _____ _____
  (Law Enforcement Agency) (Location)
- ☐ I am physically incapacitated. Reason for disability _____
  - ☐ Temporarily incapacitated
  - ☐ Permanently disabled I.D. No. _____
- ☐ I am temporarily absent student in _____
  (County) (State)
- ☐ I have been called for jury duty on _____
  (Date)

I hereby make application for an official ballot or ballots to be voted by me at such election and agree that I shall return the ballot or ballots to the election official issuing the same in sufficient time for such official to deliver the ballot or ballots to the proper polling place prior to the closing of the polls on the date of election.

Under penalties as provided by law pursuant to Section 29-10 of the Election Code, the undersigned certifies that the statements set forth in this application are true and correct.

I request ballot for: _____ Party. Dated X _____, 20____
(For a Primary)

Address to which ballot is to be mailed

_____

_____

_____

_____

X _____
(Signature of Applicant)

_____
(Name of Applicant - Please Print)

_____
Date of Birth

Illinois Revised Statutes
Revised October 1989

SBE No. A-5
Chapter 46
Sections 3-2, 19-3 & 29-10