

Pennsylvania Application for Mail-in Ballot

Print name

Please print your name exactly as registered.

1

First name _____

Middle name or initial _____

Last name _____

Jr Sr II III IV

About you

Phone and email are optional and used if information is missing on this form.

2

Birth date (required) _____

Phone number _____

Email _____

Your address

Please print your address exactly as registered. If your address has changed, you should first update your voter registration. The deadline to update your address is 15 days before the date of the next election.

3

Address (not P.O. Box) _____

Apt. number _____

City _____

State **PA** Zip _____

County _____

Voting district or precinct (if known) _____

Municipality _____

Ward (if known) _____

I have lived at this address since _____

Where to mail ballot?

4

Same as above Address or PO Box _____

City _____

State _____

Zip _____

This address is my (e.g. vacation home, temporary residence, etc.) _____

Identification

If you have a PennDOT number, you must use it. If not, please provide the last four digits of your Social Security number. See "Necessary Identification" instructions page.

5

PA driver's license or PennDOT ID card number _____

Last four digits of your Social Security number X X X - X X - _____

I do not have a PA driver's license or a PennDOT ID card or a Social Security number.

Declaration

6

I declare that I am eligible to vote by mail-in ballot at the forthcoming primary or election; that I am requesting the ballot of the party with which I am enrolled according to my voter registration record; and that all of the information which I have listed on this mail-in ballot application is true and correct.

Voter signature here X _____

Date _____

Annual mail-in request

See "What is an annual mail-in ballot request?" for more information.

7

If you would like to apply to receive mail-in ballots for the remainder of this year and if you would like to automatically receive an annual application for mail-in ballots each year, please indicate below. If you update your voter registration due to relocation out of county after you submit an annual mail-in ballot request, please ensure your annual status is transferred when updating your address.

I would like to receive mail-in ballots this year and receive annual applications for mail-in ballots each year.

Help with this form

Complete this section if you are unable to sign the declaration in Section 6.

8

I hereby state that I am unable to sign my application for a mail-in ballot without assistance because I am unable to write by reason of my illness or physical disability. I have made or have received assistance in making my mark in lieu of my signature.

Mark of voter X _____

Date _____

Address of witness _____

Signature of witness X _____

WARNING: If you receive a mail-in ballot and return your voted ballot by the deadline, you may not vote at your polling place on election day. If you are unable to return your voted mail-in ballot by the deadline, you may only vote a provisional ballot at your polling place on election day, unless you surrender your mail-in ballot and the return envelope containing the Voter's Declaration to the judge of elections to be voided to vote by regular ballot.

Return to: County Board of Elections, City Hall Rm 142, 1400 JFK Blvd, Phila, PA 19107