DO NOT REMOVE PERFORATED TABS. Moisten here and fold bottom to top to seal.

Application for a Ballot by Mail

If someone helps you complete this form or mails, emails or faxes this form for you, that person **must complete the Witness/Assistant Box 6 below. If you email or fax this form to the Early Voting Clerk,** you **must** also send the original hardcopy to the Early Voting Clerk. **If you are faxing or emailing this form on or near the deadline to apply for a Ballot by Mail,** you **must** send the original hardcopy so that the Clerk receives it no later than the fourth business day after the day the Clerk received your email or fax. **Original signatures are required on both the fax or email image and the physical hard copy.** Electronic signatures are not permitted. **THE HARDCOPY OF THIS APPLICATION MUST BE RECEIVED BY THE EARLY VOTING CLERK AND MEET ALL LEGALLY REQUIRED DEADLINES. Please read the instructions** on the back of this form completely. **If you have any questions, please call the Early Voting Clerk in your county of registration** or the office of the Texas Secretary of State at 1-800-252-8683 or log on to www.sos.texas.gov for a list of County Early Voting Clerks and their email and physical addresses.

1. Voter Information: Please print all information clearly and legibly

Name: _____
Last, First, Middle Suffix (Jr., Sr.)

Residence Address as shown on your Voter Registration Certificate

Address: _____
Street Apt. # (if any) City State Zip Code

Optional Information: Providing this information is helpful to the Early Voting Clerk, but not required.

Date of Birth: _____/_____/_____ VUID #: _____ Pct #: _____

Email: _____ Tel. #: _____

YOU MUST PROVIDE ONE of the following numbers

Texas Driver's License, Texas Personal Identification Number or Election Identification Certificate Number issued by the Department of Public Safety (NOT your voter registration VUID#)

__ __ __ __ __ __ __ __

If you do not have a Texas Driver's License, Texas Personal Identification Number or a Texas Election Identification Certificate Number, give the last 4 digits of your Social Security Number

__ __ __ __

☐ I have not been issued a Texas Driver's License/Texas Personal Identification Number/Texas Election Identification Certificate or Social Security Number

2. Mail my Ballot to:

☐ My Residence Address (as listed on my Voter Registration Certificate)

☐ Other Address - You may use the Other Address line only if the other address fits one of the categories below.

_____
Address Apt. # (if any) City State Zip Code

My Other Address is: (Check one)

☐ The mailing address listed on my Voter Registration Certificate
☐ Address Outside the County (voters absent from the county)
☐ Hospital, Nursing Home, Long-Term Care Facility, Retirement or Assisted Living Center or a Relative _____ (Indicate Relationship)
☐ Address of the Jail/Civil Commitment Facility or a Relative _____ (Indicate Relationship)

3. Reason For Voting by Mail:

☐ 65 Years of Age or Older
☐ Disability (as defined in Texas Election Code 82.002(a), see instructions on reverse) By checking this box, "I affirm that I have a sickness or physical condition that prevents me from appearing at the polling place on Election Day without a likelihood of needing personal assistance or of injuring my health."
☐ Expected to give birth within three weeks before or after Election Day
☐ Expected Absence from the County (You may apply for a ballot for one election and its resulting runoff, if your dates of absence from the county include both elections)

Date you can begin to receive mail at your out of county address: _____/_____/_____ Date of return to residence address: _____/_____/_____

☐ Confined in Jail or Involuntary Civil Commitment (You may only apply for a ballot for one election and any resulting runoff)

4. Send me a Ballot for the Following Elections:

☐ **Annual Application**
Send me a ballot for all Elections in this voting year (January – December) Annual Applications only available for voters 65 and older and voters with disabilities. You must select a party if you wish to vote in a primary. Select only one party's primary and its resulting runoff.

Primary Election (even numbered years only)
☐ Democratic Primary ☐ Any Resulting Runoff
☐ Republican Primary ☐ Any Resulting Runoff
☐ Do Not Send me a Primary Ballot

OR

Uniform Election Dates
☐ November Election ☐ May Election (not a primary runoff)
☐ Any Resulting Runoff ☐ Other Special Election: _____
(Name or Date of Special Election, if known)

Primary Election (even numbered years only)
☐ Democratic Primary ☐ Any Resulting Runoff
☐ Republican Primary ☐ Any Resulting Runoff

(Voters who are absent from the county or confined in jail/civilly committed may only apply for one election and its resulting runoff.)

5. Sign Here:

"I certify that the information given in this application is true, and I understand that giving false information in this application is a crime."

X_____ **Date:** _____/_____/_____

If applicant is unable to sign or make a mark (in the presence of a witness), the witness must complete the witness portion in Box 6 below. The signature or mark of the voter in the blank above must be an original signature made with a pen and ink. Electronic signatures are not permitted.

6. If someone helps you complete this form or mails, emails or faxes the form for you, that person must complete the section below.

Instructions for Witnesses and Assistants: See back of this form for the definitions of Witness and Assistant.

Check one or both boxes below if you served as a Witness, an Assistant or both. All information below must be completed!

☐ If the applicant is unable to make a mark, you must check this box and complete all information below. Do not sign for the voter in Box 5.
☐ Witness – If you are acting as a Witness to the applicant's signature or mark or signing on the applicant's behalf, you must state your relationship to the applicant here: _____ (Indicate Relationship)
☐ Assistant – If you assisted the applicant in completing this application in the applicant's presence or mailed/emailed/faxed the application on behalf of the applicant.

Failure to complete this section is a Class A Misdemeanor if applicant's signature was witnessed or applicant was assisted in completing this application.

X_____ _____
Signature of Witness/Assistant Printed Name of Witness/Assistant

_____
Street Address Apt. # (if any) City State Zip Code

Este formulario está disponible en Español. Para conseguir la versión en Español favor llamar sin cargo al 1-800-252-8683 a la oficina del Secretario de Estado o la Secretaria de Votación Adelantada.

FROM: _____

_____

_____

APPLY FIRST CLASS MAIL POSTAGE HERE

OFFICIAL ELECTION MAIL
Authorized by the U.S. Postal Service

TO: EARLY VOTING CLERK

_____

_____

Instructions for Application for Ballot by Mail

BOX 1:

- **Name:** Please give your full name as it was provided to the Voter Registrar and include any suffixes like Jr., Sr., or III.
- **Date of Birth:** Not a requirement but it is helpful to determine identity when voters have common names.
- **Address:** Give your full residence address as shown on your Voter Registration Certificate.
- **VUID and Precinct Number:** If you know your VUID and/or Precinct number, you may provide it, but it is not a requirement.
- **Phone Number and Email Address:** Providing your telephone number and email is not required but is extremely helpful to the Early Voting Clerk to clarify any information on this application.
- **Required Personal Information: You MUST provide one of the following numbers:** Texas Driver's License Number, Texas Personal Identification Number or Election Identification Certificate Number **(NOT your VUID#)**. If you do not have one of the above mentioned numbers, you must provide the last 4 digits of your Social Security Number. If you have not been issued any of the required numbers, check the box that says that you have not been issued one of the required numbers. If you have been issued one of the required numbers, but it is not associated with your voter registration record, please contact your local registrar to inquire about how to add one of the required numbers to your voter registration record.

BOX 2:

Your ballot must be mailed to the address where you are registered to vote or the mailing address listed on your Voter Registration Certificate. **There are some exceptions that allow you to have your ballot mailed to a different location.**

- **If you are voting by mail because you are 65 or have a disability** – Your ballot can be mailed to a hospital, nursing home, long-term care facility, retirement or assisted living facility or a relative.
- **If you are absent from the county** – Your ballot must be mailed to an address outside the county.
- **If you are confined in jail or involuntarily civilly committed** – Your ballot can be mailed to the address of the jail/commitment facility or a close relative.

BOX 3:

The State of Texas requires that you provide a reason for voting by mail. Place a checkmark in the box that best describes your reason for voting by mail.

- If you choose **65 Years of Age or Older**, you must turn 65 no later than Election Day.
- If you choose **Disability**, your disability must meet the definition of a disability as described in Section 82.002(a) of the Texas Election Code.
- If you choose **Confinement for Childbirth**, you expect to give birth within three weeks before or after Election Day.
- If you choose **Expected Absence from the County**, you must expect to be absent from the county on Election Day and during the hours of early voting by personal appearance or the remainder of the early voting period after you submit your application. The ballot must be mailed to an address outside the county and you must provide the dates that you will be absent from the county.
- If you choose **Confined in Jail/Involuntary Civil Commitment under Chapter 841 of the Health and Safety Code**, you must be legally eligible for Early Voting by Mail. At the time your early voting ballot application is submitted, you are either (1) confined in jail serving a misdemeanor sentence for a term that ends on or after Election Day; (2) pending trial after denial of bail; (3) without bail pending an appeal of a felony conviction; (4) pending trial or appeal on a bailable offense for which release on bail before Election Day is unlikely or (5) you are involuntarily civilly committed.

BOX 4:

Please select the election(s) for which you are applying.
Annual Application – Only voters who are 65 or older or who have a disability are eligible to apply for an Annual ballot by mail. An Annual ballot by mail will provide you with a ballot for all the elections

BOX 4 (CONTINUED)

in a calendar year for which you are eligible. Your Annual Application may be forwarded to other entities holding elections in which you are eligible to vote. This means that you may receive a ballot for those other elections in addition to the ballot you requested with this application. If you do not select any elections in Box 4, your application will be considered an Annual Application if your reason for voting by mail was 65 Years of Age or Older or Disability.

BOX 5:

Sign and date your application. If you are unable to sign because of a physical disability or illiteracy, the application may be signed for you by a witness. The witness must be in the presence of the voter in order to act as a witness.

BOX 6:

- **Witness** – The witness **must** place a checkmark in the Witness Box indicating you were unable to make your mark. The witness **must** state his or her relationship to you. If the witness is not a relative, the witness **must** state that on the line provided. The witness **must** sign and provide his or her printed name and residence address. It is a Class B Misdemeanor to act as a witness for more than one application in each election or act as a witness for more than one Annual ballot by mail application in a calendar year.
- **Assistant** – If a person (other than a close relative or person registered to vote at the same address) assists you in completing this application; or mails, faxes or emails this application on your behalf, the assistant **must** complete Box 6. The assistant must sign and provide his or her printed name and residence address. An assistant commits a Class A Misdemeanor if he or she provides assistance without providing the information required in Box 6.

DEADLINE TO APPLY:

Your application must be received by the Early Voting Clerk not later than the 11th day before Election Day. If the deadline falls on a weekend or holiday the deadline moves to the first preceding business day. An application may be submitted anytime in the calendar year but not later than the 11th day for the election in which you wish to vote. **Annual Applications** - If you submit an Annual Application (only available for voters 65 and older and voters with disabilities), within 60 days of an election that takes place in the following calendar year, your application will be valid for all elections in the following calendar year. This 60 day rule applies only to Annual Applications and only when there is an election within 60 days of the date the Annual Application was received by the Early Voting Clerk in the preceding year.

SUBMITTING THE APPLICATION:

The application must be submitted by one of the following methods:

- **In-Person** – Only the applicant may submit his or her own application to the Early Voting Clerk.
- **By Mail** – The application may be submitted via the U.S. Postal Service.
- **Common or Contract Carrier** – The application may be submitted via a bona fide, for profit carrier.
- **Fax Transmission** – Please contact your Early Voting Clerk or the Secretary of State for fax numbers.
- **By email** – The application may be submitted via email. Please contact your Early Voting Clerk or the Secretary of State for email addresses.

The fax or email must reach the Early Voting Clerk s office no later than the close of regular business or 12:00 noon, whichever is later on the 11th day before Election Day.

IF YOU FAX OR EMAIL THE APPLICATION YOU MUST ALSO PHYSICALLY SEND THE ORIGINAL TO THE EARLY VOTING CLERK SO THAT IT IS RECEIVED NO LATER THAN THE FOURTH BUSINESS DAY AFTER IT WAS RECEIVED BY FAX OR EMAIL.