## ARKANSAS APPLICATION FOR ABSENTEE BALLOT Revised 09/2021

<b>T</b> O 00				FOR OFFICE USE ONLY	
тосс	)UN	TY CLERK:		DATE:	
				REGISTRANT ID:	
				PRECINCT:	
DICTED	TION		LV ONE SELECTION FOR SECTIONS		
INSIK	UC	<u>FIONS TO VOTER</u> : PLEASE MAKE <u>ON</u>	LY ONE SELECTION FOR SECTIONS	ONE (1) THROUGH FOUR (4).	
1.	PLEASE SELECT A REASON FOR REQUESTING AN ABSENTEE BALLOT:				
	I will be unavoidably absent from my polling site on Election Day, OR				
	<ul> <li>I will be unable to attend the polls on Election Day because of an illness or physical disability, OR</li> <li>I am a resident of a long-term care or residential facility licensed by the state.</li> </ul>				
2	DI	PLEASE SELECT FROM THE FOLLOWING OPTIONS CONCERNING YOUR RESIDENCE:			
2.					
	I currently reside within the county in which I am registered to vote.				
	<ul> <li>I currently reside outside of the county in which I am registered to vote.</li> <li>I am a United States citizen residing outside of the territorial limits of the United States (UOCAVA).</li> </ul>				
	☐ I am a United States citizen residing outside of the territorial limits of the United States (UOCAVA). ☐ I am an active service member of the United States armed services (UOCAVA).			CAVA).	
		I am a spouse or dependent of an active service member of the United States armed services (UOCAVA).			
3.	PLEASE SELECT THE ELECTION IN WHICH YOU WISH TO CAST AN ABSENTEE BALLOT:				
3.	_				
	Preferential Primary/Nonpartisan Judicial General (held in the spring of even-numbered years).  Party Preference (Circle One): Democratic Republican Nonpartisan (You will be sent a Judicial ballot on				
		November General Election/Nonpartisan Jud		ou win be sent a Judiciai banot omy)	
		Annual School Election.	iciai Kullott.		
		Special Election to be held on	(Data)		
		Special Election to be field on	(Date).		
4.	□ All elections for <b>one calendar year</b> (i.e., today's date through December 31st of the current year).      ○ In order to qualify for this option, you must be a voter with a disability, in a long-term or residential care facility, or living outside of the county in which you are registered to vote.      □ All elections through the <b>next Federal General Election Cycle.</b> ○ In order to qualify for this option, you must be a UOCAVA voter (See Section 2 above). <b>PLEASE SELECT HOW YOU WISH TO RECEIVE YOUR BALLOT:</b> □ I will pick up my ballot from the office of the county clerk.      □ Email (available for UOCAVA voters only). My email address is:      □ Mail. Please send my ballot to the following address:				
		Man. Please send my banot to the following	address:		
			<del></del>		
			<del></del>		
	□ Picked up via Designated Bearer, Administrator, or Authorized Agent:				
	 Pri	nted Name of Bearer/Administrator/Agent	Signature of Bearer/Administr	rator/Agent	
	111	need (value of Beare)// Administrator// (gent	Signature of Bearer/7 terminate	nutoi/rigent	
	day adr	te: A designated bearer may obtain or deliver absent /s before a school election, special election, preferent ministrator, or authorized agent must provide a current or delivering an absentee ballot.	ial primary election, or general election OR the 7 da	ys before a runoff election. A bearer,	
and subj	ject t	ion I have provided is true to the best of my know o a fine of up to ten thousand dollars (\$10,000) o	r imprisonment for up to ten (10) years, or both,		
perjury	mat l	I am registered to vote, and that I am the person w	no is registered to vote.		
Residential Address of Absentee Voter			Date of Birth of Absentee Voter		
City Stat	te. an	d Zip Code	Phone Number of Absentee Voter		
210, 1500	, um	r	Those Trainess of Trosentee Total		

Signature of Absentee Voter

Printed Name of Absentee Voter