

**State of Delaware Department of Elections — Absentee Ballot Statement**  
**Request for an Absentee Ballot for Primary, General and/or Special Elections**

1. Please review instructions on the reverse side and then complete the Voter Information Section, choose the elections for which you want a ballot, choose the reason(s) you are voting by absentee ballot-and, if applicable, complete one or both Special Qualifications, then date and sign this form.

2. *Members of the Uniformed Services and citizens residing outside of the U.S. should use the Federal Post Card Application.*

**Voter Information**

Full name \_\_\_\_\_ Political Party \_\_\_\_\_  
Affiliation \_\_\_\_\_ Phone # \_\_\_\_\_

**Enter your Delaware home address below**

House or Apartment # \_\_\_\_\_  
and Street \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_

Birth \_\_\_\_\_ Social \_\_\_\_\_ Email \_\_\_\_\_  
date: \_\_\_\_\_ Security Number: \_\_\_\_\_ address \_\_\_\_\_  
(Optional — see Disclosure on reverse ) (Optional — Used to update you with your application and ballot status)

**Address where you want your absentee ballot sent if different than above:**

Where You Expect to be on Election Day \_\_\_\_\_ Election \_\_\_\_\_  
Day phone # \_\_\_\_\_  
(Optional) (City & State, or City & Country) (Optional)

**In-office use only - ID Checked \_\_\_\_\_ ED \_\_\_\_\_ RD \_\_\_\_\_ Voucher #: \_\_\_\_\_**

**Select the election or elections for which you want an absentee ballot**

☐ Primary ☐ Presidential Primary ☐ General ☐ Special ☐ All elections  
School Board Elections and School District Referenda require a different form.

**Select the reason(s) you are voting by absentee ballot:**

- ☐ (1) I am in public service of the United States (U.S.) or the State of Delaware, or I am a citizen of the U.S. temporarily residing outside the territorial limits of the U.S. and the District of Columbia, or such person's spouse or dependent when residing with or accompanying such person, or absent from this State because of illness or injury while serving the armed forces of the U.S.
- ☐ (2) I am in the armed forces of the U.S. or the merchant marine of the U.S., or attached to and serving with the armed forces of the U.S. in the American Red Cross or United Service Organizations.
- ☐ (3) Due to the nature of my business or occupation. This reason includes:
- the business or occupation of providing care to my parent, spouse, or child who is living at home and requires constant care due to illness, disability, or injury;
  - students; and
  - otherwise eligible persons who are incarcerated.
- ☐ (4) I am sick or physically disabled (temporarily or permanently).
- ☐ (5) I am absent from the district while on vacation.
- ☐ (6) I am unable to vote at a certain time or on a certain day due to the tenets or teachings of my religion.
- ☐ (7) I am otherwise authorized pursuant to the Federal Uniformed and Overseas Citizens Absentee Voting Act to vote by absentee ballot.
- ☐ (8) I am otherwise authorized by federal law to vote by absentee ballot.

**Special Qualification regarding electronic delivery of absentee ballots.**

I am voting by absentee ballot due to reason 4.

Send my ballot by: ☐ mail, ☐ fax, or ☐ email

**FAX # \_\_\_\_\_ EMAIL: \_\_\_\_\_**  
(required if you want ballot faxed or emailed)

**Special Qualification regarding Permanent Absentee voter status.**

I am voting by absentee ballot due to reason 1, 2, 4, 7, or 8, or my business or occupation is providing care to my parent, spouse or child who is living at home and requires constant care due to illness, disability, or injury.

☐ Make me a permanent absentee voter.

**I solemnly swear or affirm, under penalty of perjury, that I cannot go to my polling place on Election Day for the reason that I marked and that the information I have provided herein is true and correct.**

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

## **SOCIAL SECURITY NUMBER DISCLOSURE STATEMENT**

Disclosure of your social security number is requested so that each individual who is registered to vote is identifiable in an accurate and efficient manner. This disclosure is requested pursuant to 15 *Del. C.* Section 5503 and 5 U.S.C. Section 552a note (Section 7 of the Privacy Act of 1974, Public Law 93-579). **The disclosure of your social security number is voluntary.** If you choose not to disclose your social security number, you will be assigned a nine (9) digit identifying number during the processing of your registration.

Your social security number is used as necessary for administrative purposes relating to voting, including to identify you as a registered voter, to insure no individual is registered in more than one place, to verify address, voting districts, and other information and may be used for any other lawful purpose. The registration application containing your social security number will become part of the registration records of your county.

## **INSTRUCTIONS FOR COMPLETING YOUR REQUEST FOR AN ABSENTEE BALLOT**

Complete the Voter Information Section, choose the elections for which you want a ballot, choose the reason you are voting by absentee ballot, and, if eligible, complete one or both Special Qualifications, then date and sign this form in the designated location on the front side.

**Please note:** If you are a Uniformed Service member and citizen living outside of the United States, you may use the Federal Post Card Application (FPCA) to register to vote, update your registration, and/or request an absentee ballot. The FPCA gives eligible applicants the option for electronic delivery of your absentee ballot.

Email, FAX, or mail this completed application to the Department of Elections' Office in the County where you live so that it is received no later than 4 days before the day of the election. This application is valid for the elections indicated on the front side during the calendar year in which it was submitted.

Permanent absentee voters must inform the Department of Elections of changes of address, name, or the reason that they are voting by absentee ballot. In addition to above information, permanent absentee voters receiving ballots by email or FAX must inform the Department of Elections of changes in their email address or FAX number.

You can also complete and submit this form or your Federal Post Card Application online at <https://ivote.de.gov>.

### **Kent County**

Department of Elections - Kent County Office  
PO Box 699  
DOVER DE 19903-0699

**Phone:** (302) 739-4498  
**FAX:** (302) 739-4515  
**email:** [absenteekc@delaware.gov](mailto:absenteekc@delaware.gov)  
**Web Page:** <https://elections.delaware.gov>  
**Facebook:** <https://facebook.com/DoE.Delaware>

### **New Castle County**

Department of Elections - New Castle County Office  
PO Box 7079  
WILMINGTON DE 19803-0079

**Phone:** (302) 577-3464  
**FAX:** (302) 577-6545  
**email:** [absentee@delaware.gov](mailto:absentee@delaware.gov)  
**Web Page:** <https://elections.delaware.gov>  
**Facebook:** <https://facebook.com/DoE.Delaware>

### **Sussex County**

Department of Elections - Sussex County Office  
PO Box 457  
GEORGETOWN DE 19947-0457

**Phone:** (302) 856-5367  
**FAX:** (302) 856-5082  
**email:** [absenteesc@delaware.gov](mailto:absenteesc@delaware.gov)  
**Web Page:** <https://elections.delaware.gov>  
**Facebook:** <https://facebook.com/DoE.Delaware>