

Application for Georgia Official Absentee Ballot

The information provided in this document is made under oath and penalty of law and will be used for official government purposes. When you sign this application, you affirm that you are a citizen of the U.S., currently reside in Georgia and are eligible to vote in Georgia. Giving false information on this application violates Georgia law and is punishable by a fine up to \$100,000, imprisonment for up to 10 years, or both.

Please print clearly. Be sure to c	omplet	e all required sectior	ıs.			Reg#_		
Date of Election Required	1	Date of Primary, Ele The application mu			06/21/2022 fice* 11 days befor			
Print your name Required	2	Your name as it app	-	•	Last			Suffix
Type of ballot Required in primary	3	☐ Democratic	Republican	☐ Non F	Partisan (will not h	ave ANY party	candidates	listed)
Residential address Required Your ballot will be sent here unless you provide a temporary mailing address.	4	The residential or mare registered to vo Address City	te, contact your co	unty election o	ffice prior to subm	nitting this app	olication.	
Temporary ballot mailing address Only if you are temporarily living outside the county** and want your ballot sent to this address.	5	This address must be disabled or detained Address — City — City	oe in a different cou d in jail or other de	unty** than the tention facility.	e one where you a	re registered ı	unless you a	re physically
Contact information Recommended	6	Phone number		Ema	il address			
Voter identification Required Print carefully. This information will be used to verify your identity. Failure to provide accurate information may delay processing your application. You must provide your date of birth AND • a Georgia Driver's License or Identification Card number OR • a copy of an acceptable identification from the list in the instructions.	7	(addresses are of ga.gov/Elections do). You may also of your applicating person to your elements of the second o	dentification on you nent is visible. our full completed submit it your elections office nline: elections.sos /countyregistrars. o submit a hard cop on via U.S. mail or i lections office*. e form of es not fit in this boo opy and submit it	OR - I do not have and I am pre- ur ce* s.	r's License Numb	r's License or acceptable ide	identification la contification la conti	on Card below.
Voter oath and signature Required Use a pen. No electronic signatures allowed.	8	I, the undersigned, presented in this ap absentee ballot. Signing this oath o \$100,000, imprison Voter, sign and dat	plication are true. In behalf of anoth Iment for up to 10	By signing this er voter violat	oath, you are swe es Georgia law ar	aring that you	are the vot	er requesting an



 \square Mailed

electronically

Ballot to be:

Application for Georgia Official Absentee Ballot

Print your name	9	Your name as it appears on your voter registration.						
Required		First		Middle		Last	Suffix	
Assisting a voter? If yes, the assistant must complete this section. Voter assistance is only allowed if the voter is illiterate or physically disabled.	10	a voter who is n a fine up to \$100 Assistant's nam	ot eligi),000 o		nple	ting this application viola	er is entitled to assistance. Assisting ates Georgia law and is punishable b Date (mm/dd/yyyy)	
Requesting a ballot on behalf of a voter? If yes, complete this section. The voter must be physically disabled or temporarily residing out of the county** and must still be eligible to vote in the county** where he or she is registered.	11	are true and tha grandparent, bi son, daughter, r son-in-law, dau father-in-law, bi the age of 18 an false statemen my relationshi	t I am e other, niece, n ghter-in other- d ackn t on the shable	ontained in this applicate ither the mother, father sister, aunt, uncle, spouse phew, grandchild, n-law, mother-in-law, in-law or sister-in-law of owledge that making a sis application regardir e voter violates Georgie by a fine up to \$1,000, oth.	r, se, : a	(check one) ☐ physically disabled ☐ temporarily residing	the above-named voter is: g out of the county** d and eligible requestor	
Ballot request opt-in Optional If you meet the eligibility criteria, you may opt-in to receive an absentee ballot for the rest of the elections cycle without making another application.	12	☐ I opt-in to receive an absentee ballot for the rest of the election cycle. I am eligible for the reason selected below: ☐ D- Disabled. I am physically disabled ☐ E- Elderly. I am 65 years of age or older ☐ U- UOCAVA. I am a uniformed service member, spouse or dependent of a uniformed service member, or other US citizen residing overseas. (Complete the information to the right) UOCAVA Voters only My current status is (check or MOS - Military Overseas ☐ MST - Military Stateside ☐ OST - Overseas Tempora ☐ (may vote for federal office) (Optional) By entering my explored ballot be transmitted to me			as e rary Resident nent Resident ffices only) r email, I request that my absentee ne electronically.			
Acceptable forms of do not have a Georgi State Identification (Identification with your photo • United States military identification card agency, or entity of the United government, or Georgia cour any other entity of the state of Georgia voter identification of United States Passport • Tribal identification card Documents that show your nated the Current utility bill • Payched Bank statement • Other green Government check	a Driv Card I graph: cation c. issued b d States aty, mun of Georg ard	ver's License Number ard y any branch, depar government, Georg icipality, board, auth ia	or tment, ia state nority, c	Absentee ballot a the election. You • Email to Absentee Fax to (770) • Mail to Coble PO Box 649 Marietta, GA • In-Person to 736 Whitlook Marietta, GA erson or entity other than the or, a person signing as assimon carrier charged with refreement officer in the course	pplii can 520 520 6 7 8 8 8 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	return the form by: tee@CobbCounty.org 8-2458 or (770) 528- bunty Board of Election 0061-0649 0bb County Board of Election 0064 ector, a relative authorized to an illiterate or physically disaring the ballot application, an attention in investigation shall handle of ted absentee ballot application determined to the county of the county	ved 11 days before the date of g :2519 ons & Registration Elections & Registration Office	
	_		unovi			iounor.	- 65:	
Ballot		tes		ID Shown			For office use only	
Dist. Combo		cepted					e above named voter	
Precinct		ued		_ Other		is eligible	e	
Ballot #	_ Pa	ск		Rejected			e	
	Re	view		_		Registrar signat	ture	

 \square Voted in office

(municipal only)

 $\hfill\Box$ Delivered to voter in hospital

by Registrars or Deputy