

District and Precinct	Combo	Reason	Ballot Style Ballot Number	Registration Number
Type of ID Provided: _____		Certified and Approved: _____ (Deputy Registrar Initials)		Date: _____ Time: _____
↑ <b>FOR OFFICIAL USE ONLY</b> ↑				

\*\*\*NOTE\*\*\* Each voter must make their own application by mail, by fax, or in person unless he or she is residing temporarily out of the county or municipality, or is a disabled voter residing within the county or municipality.

**APPLICATION FOR OFFICIAL ABSENTEE BALLOT**  
(FAILURE TO FILL OUT THE FORM COMPLETELY WILL DELAY YOUR APPLICATION)

PLEASE PRINT

COUNTY OR MUNICIPALITY		APPLICATION DATE		
DATE OF ELECTION	TYPE OF ELECTION	FOR PRIMARY PLEASE CHOOSE PARTY <input type="checkbox"/> Democratic <input type="checkbox"/> Nonpartisan <input type="checkbox"/> Republican		DATE OF BIRTH
NAME AS REGISTERED	LAST	FIRST	MIDDLE	
ADDRESS AS REGISTERED #	STREET	CITY	ZIP CODE	

Request that ballot be mailed to:

#	STREET	CITY	STATE	ZIPCODE
---	--------	------	-------	---------

Request that ballot be delivered to voter in hospital, please specify hospital \_\_\_\_\_ Room Number \_\_\_\_\_  
(Hospital delivery is only on day of the election or during a five-day period immediately preceding the day of the election)

**I will not be able to vote in my precinct on Election Day for the following reason: (PLEASE SELECT ONE)**

- OP**  I am required to be absent from my precinct all day on primary or election day (7:00 a.m. to 7:00 p.m.)
- D**  I have a physical disability;
- E**  I am 75 years of age or older;
- CG**  I am unable to vote in person because I am required to give constant care to someone who is physically disabled.
- EO**  I am an election official who will perform official acts or duties in connection with the primary or election.
- RH**  I am unable to be present at the polls because the date of the primary or Election falls on a religious holiday which I observe.
- PS**  I will be unable to be present at the polls because I am required to be on duty in my place of employment for the protection of the health, life, or safety of the public during the entire time the polls are open and my place of employment is within my precinct.
- MOS**  I am currently on active duty overseas with the U.S. military, or a spouse or dependent of same.
- MST**  I am out of my precinct because I am currently on active duty stateside with the U.S. military or a spouse or dependent of same.
- OSP**  I am a citizen of the U.S. **permanently** residing outside the U.S., was last domiciled in Georgia, and I am not domiciled or voting in any other state. I understand that I am allowed to vote for President, Vice President, U.S. Senator and U.S. Congressman.
- OST**  I am a citizen of the U.S. **temporarily** residing outside of the U.S., a resident of Georgia and entitled to receive the complete ballot.
- NR**  Requesting an absentee ballot by mail and not required to provide a reason (**By Mail Only\***)  
**\*(THE ABSENTEE BALLOT WILL BE MAILED TO YOUR ADDRESS AS REGISTERED)**

**\*If you meet the following criteria: ► 75 years old or older, or Have a ► physical disability;** you may choose to complete one application and receive a ballot for the Primary and Runoff, General and Runoff, however a separate application is required for the Presidential Preference Primary;  
**► Member of the Military** living outside the county/municipality, or a spouse or dependent of same, or overseas citizen; may receive a ballot for all Primaries and Elections for federal office through the second General election; **by checking this box:**

**All absentee ballots as allowed by law.**

Any person who gives or receives, offers to give or receive, or participates in the giving or receiving of money or gifts for the purpose of registering as a voter, voting for a particular candidate in any primary or election shall be guilty of a felony. O.C.G.A. § 21-2-570.

\_\_\_\_\_  
SIGNATURE (OR MARK) OF VOTER

\_\_\_\_\_  
\*Signature of person preparing application if voter is disabled, or illiterate

**You may apply on behalf of another person in the following circumstances:** In the case of a voter residing temporarily out of the county or a physically disabled voter residing within the county, application may be made by mother, father, grandparent, brother, sister, aunt, uncle, spouse, son, daughter, niece, nephew, grandchild, son-in-law, daughter-in-law, mother-in-law, brother-in-law or sister-in-law of the age of 18 or upon completing the following oath:

I, the undersigned do swear (or affirm) that the above-named voter is  Residing temporarily out of the county or is a  physically disabled voter residing within the county and that the facts included in this application are true.

\_\_\_\_\_  
SIGNATURE AND RELATIONSHIP OF RELATIVE REQUESTING BALLOT

absentee ballot application