

INSTRUCTIONS:

1. Complete the application. Double check your work!
2. Mail after January 1st and prior to 11 days before Election Day to:

**EARLY VOTING CLERK
PO BOX 209
GEORGETOWN, TX 78627**

3. Your ballot will be mailed approximately 1 month before Election Day, or within a week of our receiving your application, whichever is later.
4. Email or call if you have questions:
Email: BBM@wilco.org Phone: 512-943-1630

Instructions for Application for Ballot by Mail

Residence Address- Give full address as shown on your voter registration certificate. If you have moved within the county but not yet changed your voter registration address with the voter registrar, indicate your new residence address.

Mail Ballot To- Give full address where you wish to have your ballot mailed, if the address is different from your residence address.

Mailing Ballot to a Different Address- Your ballot must be mailed to your home where you live or to your mailing address on your voter registration certificate. There are some exceptions that allow you to have your ballot mailed to a different location as specified below.

Reason for voting by mail	Location to mail ballot
65 or disabled	Nursing home, assisted living/ retirement center, relative, hospital
In jail	Address of jail or relative
Absent from county	Address located outside of county

Expected Absence from County- If you chose expected absence from county, you must expect to be absent from the county on election day and during the hours of early voting in person or for the remainder of the early voting period after you submit your application. **Your ballot must be mailed to an address outside the county.** Important: Give date you can begin to receive mail at the address given.

Annual Application- If you are 65 years of age or older, or disabled you may apply to receive all ballots by mail for a calendar year. If you do not select any elections, your application will be considered an Annual Application.

If you submit an Annual Application for a Ballot by Mail, your application may be forwarded to other entities holding elections where you are a qualified voter. This means that you may receive a ballot for those elections in addition to the ballot(s) you requested with this application.

Submitting Application

1. Sign and date your application- If unable to sign, please go to the Witness/Assistant box and have a person witness your mark. Witness/Assistant instructions follow below.

2. Deliver to Early Voting Clerk- You may submit your application via these methods:

In Person: Only the applicant may submit their application in person to the Early Voting Clerk **until** the early voting period begins. However, after the early voting period begins for an election, the applicant may only submit their application via mail, fax, common contract carrier, or email.

By Mail: You may mail your application via the U.S. Postal Service.

By Common Contract Carrier: You may submit via a common or contract carrier which is a bona fide, for profit carrier.

IF YOU FAX OR E-MAIL YOUR APPLICATION (by the deadline below), YOU MUST ALSO MAIL THE APPLICATION. It will be considered complete and timely as long as the original is received by the early voting clerk by the fourth business day after it was submitted by fax or e-mail.

Deadline

Your application must be received by the Early Voting Clerk of the local entity conducting the election not later than the 11th day before election day. If the 11th day is a weekend or holiday, the deadline is the first preceding business day. You may submit an application throughout the calendar year, beginning January 1. Please remember that the application must be received not later than the 11th day before the first election in which you seek to vote by mail.

If you submit an Annual Application for Ballot by Mail within 60 days before an election that takes place in the following calendar year, your application will be valid for any election that takes place in the following calendar year, regardless of the fact that your application was submitted prior to the end of the preceding calendar year. This applies to Annual Applications only and not to a regular application for Ballot by Mail.

Witness/Assistant Section

Witness: If you are unable to sign your name (due to a physical disability or illiteracy), the application may be signed in the Witness/Assistant section by a Witness. You must affix your mark to the application in the signature box or, if you are unable to make a mark, then the Witness must check the appropriate box, indicating the inability to make a mark. The Witness must state his/her name in printed form and indicate his/her relationship to you or, if unrelated, state that fact. The Witness must sign and provide his or her printed name and residence address. Unless the Witness is a close relative of the voter (parent, grandparent, spouse, child or sibling), it is a Class B misdemeanor for a person to witness more than one application for Ballot by Mail.

Assistant: If a person (other than a close relative or person registered to vote at the same address) assists you in completing this application in your presence or mails/emails/faxes this application on your behalf, then that person must complete the Witness/Assistant section. The Assistant must sign, provide his or her printed name, and his or her residence address. A person commits a Class A misdemeanor if the person provides assistance without providing the information described above unless a close relative or registered at your address.

If you have further questions or need additional assistance, please contact your Early Voting Clerk or the Secretary of State's Office at 1-800-252-8683 or www.sos.state.tx.us.

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

APPLICATION FOR BALLOT BY MAIL

If someone helps you complete this form or mails this form for you, that person must complete the Witness/Assistant section below.

1 Please print information.

Name: _____
Last, First M.I.

Date of Birth: (Optional) ____/____/____
mm/dd/yyyy

Residence Address: See back for instructions.

Address: _____

City, State, ZIP: _____

2 Mail my ballot to:

- Residence Address
- Other Address:

Address: _____

City, State, ZIP: _____

This Other Address Is:
See back for instructions.

- Mailing Address as listed on my voter registration certificate
- Nursing home, assisted living facility, or long term care facility
- Hospital
- Retirement Center
- Address of the jail
- Relative; relationship: _____
- Address outside the county

3 Contact Information (Optional- only used if our office has questions.)

Email: _____

Phone: _____

Notice to Voter:

Submit by mail or in person. All annual requests expire December 31st; a new application may be submitted after January 1st. If you fax or email this form, you must also mail the form and it must be received within 4 business days. See more information and instructions on back.

Email: BBM@wilco.org Fax: 512-943-1634

For Official Use Only:

4 Reason for Voting by Mail:

- 65 years of age or older
- Disability
- Expected absence from the county

Date you can begin to receive mail at your out of county mailing address:

____/____/____
mm/dd/yyyy

Date of return:

____/____/____
mm/dd/yyyy

- Confinement in jail

5 Ballot Requested for:

- All Elections This Year (Jan-Dec)
Annual application only available if you are applying due to age or disability.

Primary Election (Even Years)
Declare ONE political party to vote in a primary:

- Democratic Primary
- Republican Primary
- No Primary Ballot

Uniform Election Dates

- May Election
- November Election
- Other _____

- Any Resulting Runoff

6 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 shall complete the information below.

7 Witness/Assistant- See back for definitions.

Please check one or both boxes and sign below. Failure to complete this information is a Class A misdemeanor if signature was witnessed or applicant was assisted in completing the application.

- Witness:** If applicant is unable to sign and you are acting as a Witness. Witness' relationship to Applicant: _____
- 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.

Name of Witness/Assistant: _____

Address of Witness/Assistant: _____

Signature of Witness/Assistant: **X** _____