

APPLICATION FOR ABSENTEE VOTER'S BALLOT

Voter's Name _____ Send Ballot to: _____

Home Address _____

City, Village, or Post Office _____

Zip Code _____

YOU MUST PROVIDE YOUR BIRTH DATE _____ AND ONE OF THE FOLLOWING

Ohio driver's license number _____ or
the last four digits of your Social Security Number _____ or
Copy of a current and valid photo identification, a current utility bill, bank statement, government
check, paycheck, or other government document that shows your name and address.
How long have you been a resident of Mercer County, Ohio? _____

I wish to vote in the following election to be held on _____ (date of Election)

1. Primary Election

____ Democratic

____ Republican

____ Nonpartisan or issues only

2. General Election _____

3. Special Election _____

If applicable, please check one of the following:

____ I am a member of the United States Military and I am or will be absent from Mercer County

____ I am unable to mark my ballot without assistance because of the following described illness,
physical disability, or infirmity: (reason) _____

____ I am hospitalized due to an unforeseeable medical emergency or accident. Please have two
election officials; or if I have requested a family member as indicated below, deliver my ballot
to me personally at the hospital. I understand this request must be received no later than 3
p.m. on election day.

Name of Hospital _____ Date of admission _____

I request that _____, who is my _____, deliver my ballot to
me at the hospital; releasing the Mercer County Board of Elections liability for any reason.

*I, HEREBY DECLARE, UNDER PENALTY OF ELECTION FALSIFICATION, I AM A QUALIFIED
VOTER IN MERCER COUNTY AND THE STATEMENTS ABOVE ARE TRUE TO THE BEST OF
MY KNOWLEDGE AND BELIEF. I UNDERSTAND THAT IF I DO NOT PROVIDE THE
REQUESTED INFORMATION, MY APPLICATION CANNOT BE PROCESSED.*

Signature of Voter

Date Signed

Special Instruction to the Board Staff _____

*An application by mail must be received by the Mercer County Board of Elections by noon on the third day before the
election. Applications by the voter in person must be received by the close of regular board office hours the day before the
election. Applications for persons who are hospitalized due to a medical emergency will be accepted until 3:00 pm on election
day. Your completed ballot must be delivered to the Mercer County Board of Elections in person by you or a near relative, or
by mail not later than the close of polls on election day. Only exception will be out of Country and only if that ballot is
postmarked prior to the close of polls on election day.

MERCER COUNTY BOARD OF ELECTIONS

Mercer County Courthouse Room 107 419-586-2215

Hours: Monday 8-5 Tuesday – Friday 8-4

Denise Fullenkamp, Director

Lynn Wylds, Deputy Director