

2022

Absentee Ballot Canvassers Training

ABSENTEE BALLOT SCENARIOS

State Board of Election Commissioners

www.arkansas.gov/sbec

ABSENTEE VOTER STATEMENT

THIS VOTER STATEMENT SHALL BE COMPLETED AND RETURNED IN THE MAILING ENVELOPE OR THE ABSENTEE BALLOT WILL NOT BE COUNTED

INCLUDE THE FOLLOWING ITEMS IN THE OUTER MAILING ENVELOPE:

1. My completed Voter Statement (This piece of paper)
2. Copy of my Required Photo ID
 - o See instructions for a list of approved photo IDs

SPECIAL REQUIREMENT FOR SOME FIRST TIME VOTERS:

If I am a newly registered voter of this county and this is the first time I am voting in this county (and I did not include my Ark. driver's license number, the last 4 digits of my social security on my application, nor did I provide qualifying document described here), I am enclosing a copy of a current and valid photo identification card or a current utility bill, bank statement, government check, paycheck, or other government document that shows my name and address. [Does not apply to UOCAVA voters.]

3. My Ballot Only Envelope Containing my Marked Ballot

VOTER'S MAILING (Secondary) ADDRESS

USE ONLY IF YOU REQUESTED YOUR BALLOT BE MAILED TO AN ADDRESS OTHER THAN YOUR RESIDENTIAL ADDRESS LISTED IN BOX 2

Street Address / P.O. Box

City State Zip Code

<p>Box 1: VOTER'S PRINTED NAME</p> <p style="font-size: 1.2em; text-align: center;">Jon Davidson</p> <hr/> <p style="text-align: center;">MUST COMPLETE FOR YOUR BALLOT TO BE COUNTED!</p>	<p>Box 3: VOTER'S DATE OF BIRTH</p> <p style="font-size: 1.2em; text-align: center;">11 19 1968</p> <p style="text-align: center;">Month Day Year</p> <hr/> <p style="text-align: center;">MUST COMPLETE FOR YOUR BALLOT TO BE COUNTED!</p>
<p>Box 2: VOTER'S RESIDENTIAL VOTING ADDRESS</p> <p style="font-size: 0.8em;">I CERTIFY THIS IS THE PHYSICAL ADDRESS (IN ARKANSAS) AT WHICH I RESIDE* AND IS THE SAME ADDRESS I LISTED ON MY APPLICATION FOR AN ABSENTEE BALLOT</p> <p style="font-size: 1.2em; text-align: center;">123 Main Street</p> <hr/> <p>Street Address</p> <p style="font-size: 1.2em; text-align: center;">Bryant Arkansas 72022</p> <p style="font-size: 0.8em;">City State Zip Code</p> <hr/> <p style="text-align: center;">MUST COMPLETE FOR YOUR BALLOT TO BE COUNTED!</p>	<p>Box 4: Complete this Box if Your Ballot is <u>Delivered by Any Third Party Other Than a Mail Service:</u></p> <p style="font-size: 1.2em; text-align: center;">Daniel Shultz</p> <hr/> <p>Printed Name of Designated Bearer, Agent, or Administrator</p> <p style="font-size: 1.2em; text-align: center;">Daniel Shultz</p> <hr/> <p>Signature of Designated Bearer, Agent, or Administrator</p> <p style="font-size: 1.2em; text-align: center;">111 First Street</p> <hr/> <p>Address of Designated Bearer, Agent, or Administrator</p> <p style="font-size: 1.2em; text-align: center;">Bryant AR 72022</p> <p style="font-size: 0.8em;">City State Zip Code</p>
<p>Box 5: REQUIRED ABSENTEE VOTER STATEMENT</p> <p style="font-size: 0.8em;">THE INFORMATION I HAVE PROVIDED IS TRUE TO THE BEST OF MY KNOWLEDGE UNDER PENALTY OF PERJURY. IF I HAVE PROVIDED FALSE INFORMATION, I MAY BE SUBJECT TO A FINE OF UP TO TEN THOUSAND DOLLARS (\$10,000) OR IMPRISONMENT FOR UP TO TEN (10) YEARS, OR BOTH, UNDER FEDERAL OR STATE LAWS.</p> <p style="font-size: 1.2em; text-align: center;">Jon Davidson</p> <hr/> <p>Signature of Absentee Voter</p>	

YOU MUST SIGN HERE AND PLACE THIS FORM IN THE OUTER MAILING ENVELOPE FOR YOUR VOTE TO BE COUNTED!

*If you are a US Citizen living outside the United States or an Absent Uniformed Services Voter living outside your county (as described in the enclosed instructions),

ARKANSAS APPLICATION FOR ABSENTEE BALLOT

Scenario 2

Revised 09/2021

TO COUNTY CLERK: Saline County Clerk
215 N. Main St.
Benton, AR

FOR OFFICE USE ONLY	
DATE:	_____
REGISTRANT ID:	_____
PRECINCT:	_____

INSTRUCTIONS TO VOTER: PLEASE MAKE ONLY ONE SELECTION FOR SECTIONS ONE (1) THROUGH FOUR (4).

1. PLEASE SELECT A REASON FOR REQUESTING AN ABSENTEE BALLOT:

- I will be unavoidably absent from my polling site on Election Day, OR
- I will be unable to attend the polls on Election Day because of an illness or physical disability, OR
- I am a resident of a long-term care or residential facility licensed by the state.

2. PLEASE SELECT FROM THE FOLLOWING OPTIONS CONCERNING YOUR RESIDENCE:

- I currently reside within the county in which I am registered to vote.
- I currently reside outside of the county in which I am registered to vote.
- I am a United States citizen residing outside of the territorial limits of the United States (UOCAVA).
- I am an active service member of the United States armed services (UOCAVA).
- I am a spouse or dependent of an active service member of the United States armed services (UOCAVA).

3. PLEASE SELECT THE ELECTION IN WHICH YOU WISH TO CAST AN ABSENTEE BALLOT:

- Preferential Primary/Nonpartisan Judicial General (held in the spring of even-numbered years).
Party Preference (Circle One): Democratic Republican Nonpartisan (You will be sent a Judicial ballot only)
- November General Election/Nonpartisan Judicial Runoff.
- Annual School Election.
- Special Election to be held on _____ (Date).

<p>You may qualify for:</p> <ul style="list-style-type: none"> <input type="checkbox"/> All elections for one calendar year (i.e., today's date through December 31st of the current year). <ul style="list-style-type: none"> o In order to qualify for this option, you must be a voter with a disability, in a long-term or residential care facility, or living outside of the county in which you are registered to vote. <input type="checkbox"/> All elections through the next Federal General Election Cycle. <ul style="list-style-type: none"> o In order to qualify for this option, you must be a UOCAVA voter (See Section 2 above).
--

4. PLEASE SELECT HOW YOU WISH TO RECEIVE YOUR BALLOT:

- I will pick up my ballot from the office of the county clerk.
- Email (available for UOCAVA voters only). My email address is: _____
- Mail. Please send my ballot to the following address:

Picked up via Designated Bearer, Administrator, or Authorized Agent:

Daniel Shults Daniel Shults
 Printed Name of Bearer/Administrator/Agent Signature of Bearer/Administrator/Agent

Note: A designated bearer may obtain or deliver absentee ballots for no more than two (2) voters per election and may only do so within the 15 days before a school election, special election, preferential primary election, or general election OR the 7 days before a runoff election. A bearer, administrator, or authorized agent must provide a current and valid photo ID to the county clerk and must sign the register, under oath, when picking up or delivering an absentee ballot.

The information I have provided is true to the best of my knowledge under penalty of perjury. If I have provided false information, I may be guilty of perjury and subject to a fine of up to ten thousand dollars (\$10,000) or imprisonment for up to ten (10) years, or both, under federal law. I certify under penalty of perjury that I am registered to vote, and that I am the person who is registered to vote.

123 Main St
 Residential Address of Absentee Voter

11/19/68
 Date of Birth of Absentee Voter

Bryant, AR 72022
 City, State, and Zip Code

501-123-4530
 Phone Number of Absentee Voter

Jonathan Davidson
 Printed Name of Absentee Voter

Jonathan Davidson
 Signature of Absentee Voter

ABSENTEE VOTER STATEMENT

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INCLUDE THE FOLLOWING ITEMS IN THE OUTER MAILING ENVELOPE:

1. My completed Voter Statement (This piece of paper)
2. Copy of my Required Photo ID
 - o See instructions for a list of approved photo IDs

SPECIAL REQUIREMENT FOR SOME FIRST TIME VOTERS:
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3. My Ballot Only Envelope Containing my Marked Ballot

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USE ONLY IF YOU REQUESTED YOUR BALLOT BE MAILED TO AN ADDRESS OTHER THAN YOUR RESIDENTIAL ADDRESS LISTED IN BOX 2

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City State Zip Code

<p>Box 1: VOTER'S PRINTED NAME</p> <p style="text-align: center; font-size: 1.2em;">Jon Davidson</p> <hr/> <p style="text-align: center;">MUST COMPLETE FOR YOUR BALLOT TO BE COUNTED!</p>	<p>Box 3: VOTER'S DATE OF BIRTH</p> <p style="text-align: center; font-size: 1.2em;">11 / 19 / 1968</p> <p style="text-align: center;">Month Day Year</p> <hr/> <p style="text-align: center;">MUST COMPLETE FOR YOUR BALLOT TO BE COUNTED!</p>
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<p>Box 5: REQUIRED ABSENTEE VOTER STATEMENT</p> <p>THE INFORMATION I HAVE PROVIDED IS TRUE TO THE BEST OF MY KNOWLEDGE UNDER PENALTY OF PERJURY. IF I HAVE PROVIDED FALSE INFORMATION, I MAY BE SUBJECT TO A FINE OF UP TO TEN THOUSAND DOLLARS (\$10,000) OR IMPRISONMENT FOR UP TO TEN (10) YEARS, OR BOTH, UNDER FEDERAL OR STATE LAWS.</p> <hr/> <p style="text-align: center;">Signature of Absentee Voter</p>	

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*If you are a US Citizen living outside the United States or an Absent Uniformed Services Voter living outside your county (as described in the enclosed instructions),

ARKANSAS APPLICATION FOR ABSENTEE BALLOT

Scenario 3

Revised 09/2021

TO COUNTY CLERK: Saline County Clerk
215 N. Main St.
Benton, AR

FOR OFFICE USE ONLY	
DATE:	_____
REGISTRANT ID:	_____
PRECINCT:	_____

INSTRUCTIONS TO VOTER: PLEASE MAKE ONLY ONE SELECTION FOR SECTIONS ONE (1) THROUGH FOUR (4).

1. PLEASE SELECT A REASON FOR REQUESTING AN ABSENTEE BALLOT:

- I will be unavoidably absent from my polling site on Election Day, OR
- I will be unable to attend the polls on Election Day because of an illness or physical disability, OR
- I am a resident of a long-term care or residential facility licensed by the state.

2. PLEASE SELECT FROM THE FOLLOWING OPTIONS CONCERNING YOUR RESIDENCE:

- I currently reside within the county in which I am registered to vote.
- I currently reside outside of the county in which I am registered to vote.
- I am a United States citizen residing outside of the territorial limits of the United States (UOCAVA).
- I am an active service member of the United States armed services (UOCAVA).
- I am a spouse or dependent of an active service member of the United States armed services (UOCAVA).

3. PLEASE SELECT THE ELECTION IN WHICH YOU WISH TO CAST AN ABSENTEE BALLOT:

- Preferential Primary/Nonpartisan Judicial General (held in the spring of even-numbered years).
Party Preference (Circle One): Democratic Republican Nonpartisan (You will be sent a Judicial ballot only)
- November General Election/Nonpartisan Judicial Runoff.
- Annual School Election.
- Special Election to be held on _____ (Date).

You may qualify for:

- All elections for **one calendar year** (i.e., today's date through December 31st of the current year).
 - In order to qualify for this option, you must be a voter with a disability, in a long-term or residential care facility, or living outside of the county in which you are registered to vote.
- All elections through the **next Federal General Election Cycle**.
 - In order to qualify for this option, you must be a UOCAVA voter (See Section 2 above).

4. PLEASE SELECT HOW YOU WISH TO RECEIVE YOUR BALLOT:

- I will pick up my ballot from the office of the county clerk.
- Email (available for UOCAVA voters only). My email address is: _____
- Mail. Please send my ballot to the following address:

Picked up via Designated Bearer, Administrator, or Authorized Agent:

Daniel Shults
 Printed Name of Bearer/Administrator/Agent

Daniel Shults
 Signature of Bearer/Administrator/Agent

Note: A designated bearer may obtain or deliver absentee ballots for no more than two (2) voters per election and may only do so within the 15 days before a school election, special election, preferential primary election, or general election OR the 7 days before a runoff election. A bearer, administrator, or authorized agent must provide a current and valid photo ID to the county clerk and must sign the register, under oath, when picking up or delivering an absentee ballot.

The information I have provided is true to the best of my knowledge under penalty of perjury. If I have provided false information, I may be guilty of perjury and subject to a fine of up to ten thousand dollars (\$10,000) or imprisonment for up to ten (10) years, or both, under federal law. I certify under penalty of perjury that I am registered to vote, and that I am the person who is registered to vote.

123 main st
 Residential Address of Absentee Voter

11/19/68
 Date of Birth of Absentee Voter

Bryant, AR 72022
 City, State, and Zip Code

501-123-4530
 Phone Number of Absentee Voter

Jonathan Davidson
 Printed Name of Absentee Voter

Jonathan Davidson
 Signature of Absentee Voter

ABSENTEE VOTER STATEMENT

Scenario 3

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<p>Box 1: VOTER'S PRINTED NAME</p> <p><u>Jon Davidson</u></p> <p>MUST COMPLETE FOR YOUR BALLOT TO BE COUNTED!</p>	<p>Box 3: VOTER'S DATE OF BIRTH</p> <p><u>11</u> / <u>19</u> / <u>1968</u></p> <p>Month Day Year</p> <p>MUST COMPLETE FOR YOUR BALLOT TO BE COUNTED!</p>
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<p>Box 5: REQUIRED ABSENTEE VOTER STATEMENT</p> <p>THE INFORMATION I HAVE PROVIDED IS TRUE TO THE BEST OF MY KNOWLEDGE UNDER PENALTY OF PERJURY. IF I HAVE PROVIDED FALSE INFORMATION, I MAY BE SUBJECT TO A FINE OF UP TO TEN THOUSAND DOLLARS (\$10,000) OR IMPRISONMENT FOR UP TO TEN (10) YEARS, OR BOTH, UNDER FEDERAL OR STATE LAWS.</p> <p><u>Jon Davidson</u></p> <p>Signature of Absentee Voter</p>	

← YOU MUST SIGN HERE AND PLACE THIS FORM IN THE OUTER MAILING ENVELOPE FOR YOUR VOTE TO BE COUNTED!

Scenario 4

Jon Davidson

123 Main Street

Benton, AR 72022



SALINE COUNTY CLERK

215 N. Main Street

Benton, AR 72015

**DESIGNATED
REMARK**

Chris Mattison

234 River Ave.

Benton

ABSENTEE VOTER STATEMENT

Scenario 4

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USE ONLY IF YOU REQUESTED YOUR BALLOT BE MAILED TO AN ADDRESS OTHER THAN YOUR RESIDENTIAL ADDRESS LISTED IN BOX 2

Street Address / P.O. Box

City State Zip Code

<p>Box 1: VOTER'S PRINTED NAME</p> <p><u>Jon Davidson</u></p> <p>MUST COMPLETE FOR YOUR BALLOT TO BE COUNTED!</p>	<p>Box 3: VOTER'S DATE OF BIRTH</p> <p><u>11</u> / <u>19</u> / <u>1968</u></p> <p>Month Day Year</p> <p>MUST COMPLETE FOR YOUR BALLOT TO BE COUNTED!</p>
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ARKANSAS APPLICATION FOR ABSENTEE BALLOT

Revised 09/2021

TO COUNTY CLERK: Saline Co. Clerk
215 N. Main Street
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FOR OFFICE USE ONLY
DATE:
REGISTRANT ID:
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Signature of Bearer/Administrator/Agent

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123 Main St.
Residential Address of Absentee Voter
Bryant, AR 72022
City, State, and Zip Code
Jonathan Davidson
Printed Name of Absentee Voter

11/19/68
Date of Birth of Absentee Voter
501-123-4530
Phone Number of Absentee Voter
Jonathan Davidson
Signature of Absentee Voter

Scenario 5

ABSENTEE VOTER STATEMENT

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_____ Street Address / P.O. Box		
_____ City	_____ State	_____ Zip Code

<p>Box 1: VOTER'S PRINTED NAME</p> <p style="text-align: center;"><u>Jon Davidson</u></p> <hr/> <p>MUST COMPLETE FOR YOUR BALLOT TO BE COUNTED!</p>	<p>Box 3: VOTER'S DATE OF BIRTH</p> <p style="text-align: center;"><u>11</u> <u>19</u> <u>1968</u></p> <p style="text-align: center;">Month Day Year</p> <hr/> <p>MUST COMPLETE FOR YOUR BALLOT TO BE COUNTED!</p>
<p>Box 2: VOTER'S RESIDENTIAL VOTING ADDRESS</p> <p>I CERTIFY THIS IS THE PHYSICAL ADDRESS (IN ARKANSAS) AT WHICH I RESIDE* AND IS THE SAME ADDRESS I LISTED ON MY APPLICATION FOR AN ABSENTEE BALLOT</p> <p style="text-align: center;"><u>P.O. Box 310</u></p> <hr/> <p>Street Address</p> <p style="text-align: center;"><u>Bryant</u> <u>Arkansas</u> <u>72021</u></p> <p style="text-align: center;">City State Zip Code</p> <hr/> <p>MUST COMPLETE FOR YOUR BALLOT TO BE COUNTED!</p>	<p>Box 4: Complete this Box if Your Ballot is <u>Delivered</u> by Any Third Party Other Than a Mail Service:</p> <hr/> <p>Printed Name of Designated Bearer, Agent, or Administrator</p> <hr/> <p>Signature of Designated Bearer, Agent, or Administrator</p> <hr/> <p>Address of Designated Bearer, Agent, or Administrator</p> <hr/> <p style="text-align: center;">City State Zip Code</p>
<p>Box 5: REQUIRED ABSENTEE VOTER STATEMENT</p> <p>THE INFORMATION I HAVE PROVIDED IS TRUE TO THE BEST OF MY KNOWLEDGE UNDER PENALTY OF PERJURY. IF I HAVE PROVIDED FALSE INFORMATION, I MAY BE SUBJECT TO A FINE OF UP TO TEN THOUSAND DOLLARS (\$10,000) OR IMPRISONMENT FOR UP TO TEN (10) YEARS, OR BOTH, UNDER FEDERAL OR STATE LAWS.</p> <p style="text-align: center;"><u>Jonathan Davidson</u></p> <hr/> <p>Signature of Absentee Voter</p>	

YOU MUST SIGN HERE AND PLACE THIS FORM IN THE OUTER MAILING ENVELOPE FOR YOUR VOTE TO BE COUNTED!

Scenario 6



Application for Absentee Ballot

You may qualify for:

- All elections for **one calendar year** (i.e., today's date through December 31st of the current year).
 - In order to qualify for this option, you must be a voter with a disability, in a long-term or residential care facility, or living outside of the county in which you are registered to vote.
- All elections through the **next Federal General Election Cycle**.
 - In order to qualify for this option, you must be a UOCAVA voter (See Section 2 above).

4. PLEASE SELECT HOW YOU WISH TO RECEIVE YOUR BALLOT:

- I will pick up my ballot from the office of the county clerk.
- Email (available for UOCAVA voters only). My email address is: _____
- Mail. Please send my ballot to the following address:

Picked up via Designated Bearer, Administrator, or Authorized Agent:

Daniel Shults Printed Name of Bearer/Administrator/Agent Daniel Shults Signature of Bearer/Administrator/Agent

Note: A designated bearer may obtain or deliver absentee ballots for no more than two (2) voters per election and may only do so within the 15 days before a school election, special election, preferential primary election, or general election OR the 7 days before a runoff election. A bearer, administrator, or authorized agent must provide a current and valid photo ID to the county clerk and must sign the register, under oath, when picking up or delivering an absentee ballot.

The information I have provided is true to the best of my knowledge under penalty of perjury. If I have provided false information, I may be guilty of perjury and subject to a fine of up to ten thousand dollars (\$10,000) or imprisonment for up to ten (10) years, or both, under federal law. I certify under penalty of perjury that I am registered to vote, and that I am the person who is registered to vote.

123 Main St Residential Address of Absentee Voter 11/19/68 Date of Birth of Absentee Voter
Bryant, AR 72022 City, State, and Zip Code 501-123-4530 Phone Number of Absentee Voter
Jonathan Davidson Printed Name of Absentee Voter Jonathan Davidson Signature of Absentee Voter

ABSENTEE VOTER STATEMENT

Scenario 6

THIS VOTER STATEMENT SHALL BE COMPLETED AND RETURNED IN THE MAILING ENVELOPE OR THE ABSENTEE BALLOT WILL NOT BE COUNTED

INCLUDE THE FOLLOWING ITEMS IN THE OUTER MAILING ENVELOPE:

1. My completed Voter Statement (This piece of paper)
2. Copy of my Required Photo ID
 - o See instructions for a list of approved photo IDs

SPECIAL REQUIREMENT FOR SOME FIRST TIME VOTERS:

If I am a newly registered voter of this county and this is the first time I am voting in this county (and I did not include my Ark. driver's license number, the last 4 digits of my social security on my application, nor did I provide qualifying document described here), I am enclosing a copy of a current and valid photo identification card or a current utility bill, bank statement, government check, paycheck, or other government document that shows my name and address. [Does not apply to UOCAVA voters.]

3. My Ballot Only Envelope Containing my Marked Ballot

VOTER'S MAILING (Secondary) ADDRESS <u>USE ONLY</u> IF YOU REQUESTED YOUR BALLOT BE MAILED TO AN ADDRESS OTHER THAN YOUR RESIDENTIAL ADDRESS LISTED IN <u>BOX 2</u>		
_____ Street Address / P.O. Box		
_____ City	_____ State	_____ Zip Code

Box 1: VOTER'S PRINTED NAME <u>Jon Davidson</u> _____ MUST COMPLETE FOR YOUR BALLOT TO BE COUNTED!	Box 3: VOTER'S DATE OF BIRTH <u>11</u> / <u>19</u> / <u>1968</u> Month Day Year MUST COMPLETE FOR YOUR BALLOT TO BE COUNTED!
Box 2: VOTER'S RESIDENTIAL VOTING ADDRESS I CERTIFY THIS IS THE PHYSICAL ADDRESS (IN ARKANSAS) AT WHICH I RESIDE* AND IS THE SAME ADDRESS I LISTED ON MY APPLICATION FOR AN ABSENTEE BALLOT <u>123 Main Street</u> _____ Street Address <u>Bryant</u> <u>Arkansas</u> <u>72022</u> City State Zip Code MUST COMPLETE FOR YOUR BALLOT TO BE COUNTED!	Box 4: Complete this Box if Your Ballot is Delivered by Any Third Party Other Than a Mail Service: <u>Daniel Shults</u> _____ Printed Name of Designated Bearer, Agent, or Administrator <u>Daniel Shults</u> _____ Signature of Designated Bearer, Agent, or Administrator <u>111 First Street</u> _____ Address of Designated Bearer, Agent, or Administrator <u>Bryant</u> <u>AR</u> <u>72022</u> City State Zip Code

Box 5: REQUIRED ABSENTEE VOTER STATEMENT
THE INFORMATION I HAVE PROVIDED IS TRUE TO THE BEST OF MY KNOWLEDGE UNDER PENALTY OF PERJURY. IF I HAVE PROVIDED FALSE INFORMATION, I MAY BE SUBJECT TO A FINE OF UP TO TEN THOUSAND DOLLARS (\$10,000) OR IMPRISONMENT FOR UP TO TEN (10) YEARS, OR BOTH, UNDER FEDERAL OR STATE LAWS.

Jon Davidson

Signature of Absentee Voter

← YOU MUST SIGN HERE AND PLACE THIS FORM IN THE OUTER MAILING ENVELOPE FOR YOUR VOTE TO BE COUNTED!

*If you are a US Citizen living outside the United States or an Absent Uniformed Services Voter living outside your county (as described in the enclosed instructions),

Scenario 7



Application for Absentee Ballot

You may qualify for:

- All elections for **one calendar year** (i.e., today's date through December 31st of the current year).
 - In order to qualify for this option, you must be a voter with a disability, in a long-term or residential care facility, or living outside of the county in which you are registered to vote.
- All elections through the **next Federal General Election Cycle**.
 - In order to qualify for this option, you must be a UOCAVA voter (See Section 2 above).

4. PLEASE SELECT HOW YOU WISH TO RECEIVE YOUR BALLOT:

- I will pick up my ballot from the office of the county clerk.
- Email (available for UOCAVA voters only). My email address is: _____
- Mail. Please send my ballot to the following address:

Picked up via Designated Bearer, Administrator, or Authorized Agent:

Daniel Shults
Printed Name of Bearer/Administrator/Agent

Daniel Shults
Signature of Bearer/Administrator/Agent

Note: A designated bearer may obtain or deliver absentee ballots for no more than two (2) voters per election and may only do so within the 15 days before a school election, special election, preferential primary election, or general election OR the 7 days before a runoff election. A bearer, administrator, or authorized agent must provide a current and valid photo ID to the county clerk and must sign the register, under oath, when picking up or delivering an absentee ballot.

The information I have provided is true to the best of my knowledge under penalty of perjury. If I have provided false information, I may be guilty of perjury and subject to a fine of up to ten thousand dollars (\$10,000) or imprisonment for up to ten (10) years, or both, under federal law. I certify under penalty of perjury that I am registered to vote, and that I am the person who is registered to vote.

123 Main St
Residential Address of Absentee Voter

Bryant, AR 72022
City, State, and Zip Code

Jonathan Davidson
Printed Name of Absentee Voter

11/19/68
Date of Birth of Absentee Voter

501-123-4530
Phone Number of Absentee Voter

Jonathan Davidson
Signature of Absentee Voter

ABSENTEE VOTER STATEMENT

Scenario 7

THIS VOTER STATEMENT SHALL BE COMPLETED AND RETURNED IN THE MAILING ENVELOPE OR THE ABSENTEE BALLOT WILL NOT BE COUNTED

INCLUDE THE FOLLOWING ITEMS IN THE OUTER MAILING ENVELOPE:

1. My completed Voter Statement (This piece of paper)
2. Copy of my Required Photo ID
 - o See instructions for a list of approved photo IDs

SPECIAL REQUIREMENT FOR SOME FIRST TIME VOTERS:

If I am a newly registered voter of this county and this is the first time I am voting in this county (and I did not include my Ark. driver's license number, the last 4 digits of my social security on my application, nor did I provide qualifying document described here), I am enclosing a copy of a current and valid photo identification card or a current utility bill, bank statement, government check, paycheck, or other government document that shows my name and address. [Does not apply to UOCAVA voters.]

3. My Ballot Only Envelope Containing my Marked Ballot

VOTER'S MAILING (Secondary) ADDRESS

USE ONLY IF YOU REQUESTED YOUR BALLOT BE MAILED TO AN ADDRESS OTHER THAN YOUR RESIDENTIAL ADDRESS LISTED IN BOX 2

Street Address / P.O. Box

City State Zip Code

Box 1: VOTER'S PRINTED NAME <u>Jon Davidson</u> MUST COMPLETE FOR YOUR BALLOT TO BE COUNTED!	Box 3: VOTER'S DATE OF BIRTH _____ Month Day Year MUST COMPLETE FOR YOUR BALLOT TO BE COUNTED!
Box 2: VOTER'S RESIDENTIAL VOTING ADDRESS I CERTIFY THIS IS THE PHYSICAL ADDRESS (IN ARKANSAS) AT WHICH I RESIDE* AND IS THE SAME ADDRESS I LISTED ON MY APPLICATION FOR AN ABSENTEE BALLOT <u>123 Main Street</u> Street Address <u>Bryant</u> <u>Arkansas</u> <u>72022</u> City State Zip Code MUST COMPLETE FOR YOUR BALLOT TO BE COUNTED!	Box 4: Complete this Box if Your Ballot is <u>Delivered</u> by Any Third Party Other Than a Mail Service: <u>Chris Madison</u> Printed Name of Designated Bearer, Agent, or Administrator <u>Chris Mah</u> Signature of Designated Bearer, Agent, or Administrator <u>234 River Ave</u> Address of Designated Bearer, Agent, or Administrator <u>Benton</u> <u>AR</u> <u>72220</u> City State Zip Code
Box 5: REQUIRED ABSENTEE VOTER STATEMENT THE INFORMATION I HAVE PROVIDED IS TRUE TO THE BEST OF MY KNOWLEDGE UNDER PENALTY OF PERJURY. IF I HAVE PROVIDED FALSE INFORMATION, I MAY BE SUBJECT TO A FINE OF UP TO TEN THOUSAND DOLLARS (\$10,000) OR IMPRISONMENT FOR UP TO TEN (10) YEARS, OR BOTH, UNDER FEDERAL OR STATE LAWS. <u>Jon Davidson</u> Signature of Absentee Voter	

← YOU MUST SIGN HERE AND PLACE THIS FORM IN THE OUTER MAILING ENVELOPE FOR YOUR VOTE TO BE COUNTED!

