#### 2022

# **Absentee Ballot Canvassers Training**

# **ABSENTEE**

# **BALLOT**

# **SCENARIOS**

**State Board of Election Commissioners** 

www.arkansas.gov/sbec

# ARKANSAS APPLICATION FOR ABSENTEE BALLOT Revised 09/2021

	FOR OFFICE USE ONLY
TO COUNTY CLERK: Saline County Clerk 215 N. Main St. Benton, AR	DATE:
215 N. Main St.	REGISTRANT ID:
Beston, AR	
	PRECINCT:
INSTRUCTIONS TO VOTER: PLEASE MAKE <u>ONLY ONE SELECTION</u> FOR SECTIONS	ONE (1) THROUGH FOUR (4).
1. PLEASE SELECT A REASON FOR REQUESTING AN ABSENTEÉ BALLOT:	
I will be unavoidably absent from my polling site on Election Day, OR	
<ul> <li>I will be unable to attend the polls on Election Day because of an illness or physical disabi</li> </ul>	lity, OR
I am a resident of a long-term care or residential facility licensed by the state.	
PLEASE SELECT FROM THE FOLLOWING OPTIONS CONCERNING YOUR RESILE     1 currently reside within the county in which I am registered to vote.	DENCE:
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 (U	OCAVA
I am an active service member of the United States armed services (UOCAVA).	ocava).
I am a spouse or dependent of an active service member of the United States armed service	s (UOCAVA)
3. PLEASE SELECT THE ELECTION IN WHICH YOU WISH TO CAST AN ABSENTER	BALLOT:
Preferential Primary/Nonpartisan Judicial General (held in the spring of even-numbered ye	ars).
Party Preference (Circle One): Democratic Republican (Nonpartisan)	ou will be sent a Judicial ballot only)
☐ November General Election/Nonpartisan Judicial Runoff.	
Annual School Election.	
☐ Special Election to be held on(Date).	
care facility, or living outside of the county in which you are registered  All elections through the next Federal General Election Cycle.  In order to qualify for this option, you must be a UOCAVA voter (See PLEASE SELECT HOW YOU WISH TO RECEIVE YOUR BALLOT:  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:	e *
Picked up via Designated Bearer, Administrator, or Authorized Agent:	
	2 14
Divinity of	ults
Note: A designated bearer may obtain or deliver absentee ballots for no more than two (2) voters per electi- days before a school election, special election, preferential primary election, or general election OR the 7 da administrator, or authorized agent must provide a current and valid photo ID to the county clerk and must sign	on and may only do so within the 15
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 and subject to a fine of up to ten thousand dollars (\$10,000) or imprisonment for up to ten (10) years, or both, erjury that I am registered to vote, and that I am the person who is registered to vote.  123 Mair St.	l false information, I may be guilty of perjury under federal law. I certify under penalty of
esidential Address of Absentee Voter Date of Birth of Absentee Voter	
O Date of Date of Total	
Bryant, AR 72022  ity, State, and Zip Code  Sovathar Davidson  Jonathar Davidson	
Those Number of Absence Voter	
Sovathan Davidson Gonathan Varide	~
minute realise of Absentee Voter Signature of Absentee Voter	

## 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:

- My completed Voter Statement (This piece of paper)
- Copy of my Required Photo ID

Signature of Absentee Voter

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.] My Rallot Only Envelope Containing my Marked Ballot

CONTRACTOR		
VOTER'S MAIL	ING (Secondary	) ADDRESS
USE ONLY IF YOU	J REQUESTED YOU	R BALLOT BE
MAILED TO AN	ADDRESS OTHER T	HAN YOUR
RESIDENTIAL	ADDRESS LISTED I	N BOX 2
Street Address / P	.O. Box	
City	State	Zip Code
ity State Zip Code		

MAILING ENVELOPE FOR YOUR VOTE TO BE COUNTED!

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Code
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#### ARKANSAS APPLICATION FOR ABSENTEE BALLOT Scenario 2

R	evised 09/2021	
TO COUNTY CLERK. Solar County Clar	1¢	FOR OFFICE USE ONLY
TO COUNTY CLERK: Saline County Cler 215 N. Main St. Benton, AR		DATE:
Benton, AR		REGISTRANT ID:
		PRECINCT:
INSTRUCTIONS TO VOTER: PLEASE MAKE ONLY OF	NE SELECTION FOR SECTI	ONS ONE (1) THROUGH FOUR (4).
PLEASE SELECT A REASON FOR REQUESTING	Election Day, OR Decause of an illness or physical decause of the Vote.  The registered to vote, erritorial limits of the United State armed services (UOCAVA), aber of the United States armed set U WISH TO CAST AN ABSEN meld in the spring of even-number Republican Nonpartis	RESIDENCE: es (UOCAVA). ervices (UOCAVA). VTEE BALLOT:
Special Election to be held on	(Date).	
care facility, or living outside of  All elections through the next Federal Ger  o In order to qualify for this option  4. PLEASE SELECT HOW YOU WISH TO RECEIVE  I will pick up my ballot from the office of the county  Email (available for UOCAVA voters only). My email  Mail. Please send my ballot to the following address:	the county in which you are regis neral Election Cycle. I, you must be a UOCAVA voter YOUR BALLOT: clerk. iil address is:	(See Section 2 above).
Picked up via Designated Bearer, Administrator, or A  Daviel Shults  Printed Name of Bearer/Administrator/Agent  Note: A designated bearer may obtain or deliver absentee ballots days before a school election, special election, preferential prima administrator, or authorized agent must provide a current and valid up or delivering an absentee ballot.	Signature of Bearer/Adn s for no more than (wo (2) voters per ry election, or general election OR th	election and may only do so within the 15 e 7 days before a runoff election. A bearer.
The information I have provided is true to the best of my knowledge unand subject to a fine of up to ten thousand dollars (\$10,000) or impriso perjury that I am registered to vote, and that I am the person who is reg  123 Main St  Residential Address of Absentee Voter  Bryant AR 72022  City, Stalle, and Zip Code  Tonathan Daxi dson	nment for up to ten (10) years, or	both, under federal law. I certify under penalty o

# 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
  - 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 M	AILING (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	s / P.O. Box		
City	State	Zip Code	

Box 1: VOTER'S PRINTED NAME	Box 3: VOTER'S DATE OF BIRTH
Jon Davidson	111968
Must Complete for Your Ballot to be Counted!	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)	Box 4: Complete this Box if Your Ballot is <u>Delivered</u> by Any Third Party Other Than a Mail Service:  Dance Shults
AT WHICH I RESIDE* AND IS THE SAME ADDRESS I LISTED  ON MY APPLICATION FOR AN ABSENTEE BALLOT  (23 Main Street	Printed Name of Designated Bearer, Agent, or Administrator Daniel Thults
Street Address	Signature of Designated Bearer, Agent, or Administrator  11 First Street  Address of Designated Bearer, Agent, or Administrator
Bryan + Arkansas 72022 City State Zip Code  Must Complete for Your Ballot to be Counted!	Address of Designated Bearer, Agent, or Administrator  Sryart AL 72022  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.



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

Signature of Absentee Voter

<sup>\*</sup>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

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 OF	NE (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,  I am a resident of a long-term care or residential facility licensed by the state.  PLEASE SELECT FROM THE FOLLOWING OPTIONS CONCERNING YOUR RESIDENT 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).  PLEASE SELECT THE ELECTION IN WHICH YOU WISH TO CAST AN ABSENTEE BAY Preferential Primary/Nonpartisan Judicial General (held in the spring of even-numbered years) Party Preference (Circle One): Democratic Republican Nonpartisan (You November General Election/Nonpartisan Judicial Runoff.  Annual School Election.  Special Election to be held on (Date).	NCE: AVA). JOCAVA). ALLOT:
You may qualify for:  All elections for one calendar year (i.e., today's date through December 31st of the composition of the composition of the composition of the county in which you are registered to a care facility, or living outside of the county in which you are registered to a care facility, or living outside of the county in which you are registered to a care facility, or living outside of the county in which you are registered to a care facility, or living outside of the county in which you are registered to a care facility, or living outside of the county in which you are registered to a care facility, or living outside of the county in which you are registered to a care facility, or living outside of the county in which you are registered to a care facility, or living outside of the county in which you are registered to a care facility, or living outside of the county in which you are registered to a care facility, or living outside of the county in which you are registered to a care facility, or living outside of the county in which you are registered to a care facility, or living outside of the county in which you are registered to a care facility, or living outside of the county in which you are registered to a care facility, or living outside of the county in which you are registered to a care facility, or living outside of the county in which you are registered to a care facility, or living outside of the county in which you are registered to a care facility, or living outside of the county in which you are registered to a care facility, or living outside of the county in which you are registered to a care facility, or living outside of the county in which you are registered to a care facility, or living outside of the county in which you are registered to a care facility, or living outside of the county in which you are registered to a care facility, or living outside of the county in which you are registered to a care facility of the county in which you are facility or living outside of the co	a long-term or residential vote.
Picked up via Designated Bearer, Administrator, or Authorized Agent:  Daviel Shults  Printed Name of Bearer/Administrator/Agent  Note: A designated bearer may obtain or deliver absentee ballots for no more than two (2) voters per election a days before a school election, special election, preferential primary election, or general election OR the 7 days be administrator, or authorized agent must provide a current and valid photo ID to the county clerk and must sign the rup or delivering an absentee ballot.  The information I have provided is true to the best of my knowledge under parelty of periods.	and may only do so within the 15 efore a runoff election. A bearer, egister, under oath, when picking
The information I have provided is true to the best of my knowledge under penalty of perjury. If I have provided fall and subject to a fine of up to ten thousand dollars (\$10,000) or imprisonment for up to ten (10) years, or both, und perjury that I am registered to vote, and that I am the person who is registered to vote.  123 Mair St  11/19/68	se information, I may be guilty of perjury ler federal law. I certify under penalty of
Residential Address of Absentee Voter  Bryant, AR 72022  City, State, and Zip Code  Jonathan Davidson  Jonathan Davidson  Date of Birth of Absentee Voter  501-123-4530  Phone Number of Absentee Voter  Jonathan Davidson	
Printed Name of Absentee Voter Signature of Absentee Voter	

# 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
  - 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.]

My Ballot Only Envelope Containing my Marked Ballot

VOTER'S MAILING	i (Secondary	() ADDRESS
USE ONLY IF YOU RE	QUESTED YOU	R BALLOT BE
MAILED TO AN ADI	DRESS OTHER T	HAN YOUR
RESIDENTIAL AD	DRESS LISTED I	N BOX 2
Street Address / P.O.	Вох	

VOTER'S DATE OF BIRTH VOTER'S PRINTED NAME Box 3: Box 1: Jon Davidson 19 1968 11 Year Day Month MUST COMPLETE FOR YOUR BALLOT TO BE COUNTED! MUST COMPLETE FOR YOUR BALLOT TO BE COUNTED! Box 4: Complete this Box if Your Ballot is Delivered **VOTER'S RESIDENTIAL** Box 2: by Any Third Party Other Than a Mail Service: VOTING ADDRESS Chris Madison I CERTIFY THIS IS THE PHYSICAL ADDRESS (IN ARKANSAS) AT WHICH I RESIDE\* AND IS THE SAME ADDRESS I LISTED Printed Name of Designated Bearer, Agent, or Administrator ON MY APPLICATION FOR AN ABSENTEE BALLOT Chr 123 Main Street Signature of Designated Bearer, Agent, or Administrator Street Address 234 River Ave Bryant Address of Designated Bearer, Agent, or Administrator City Zip Code Benton 72220 State Zip Code MUST COMPLETE FOR YOUR BALLOT TO BE COUNTED! City

#### Box 5: REQUIRED ABSENTEE VOTER STATEMENT

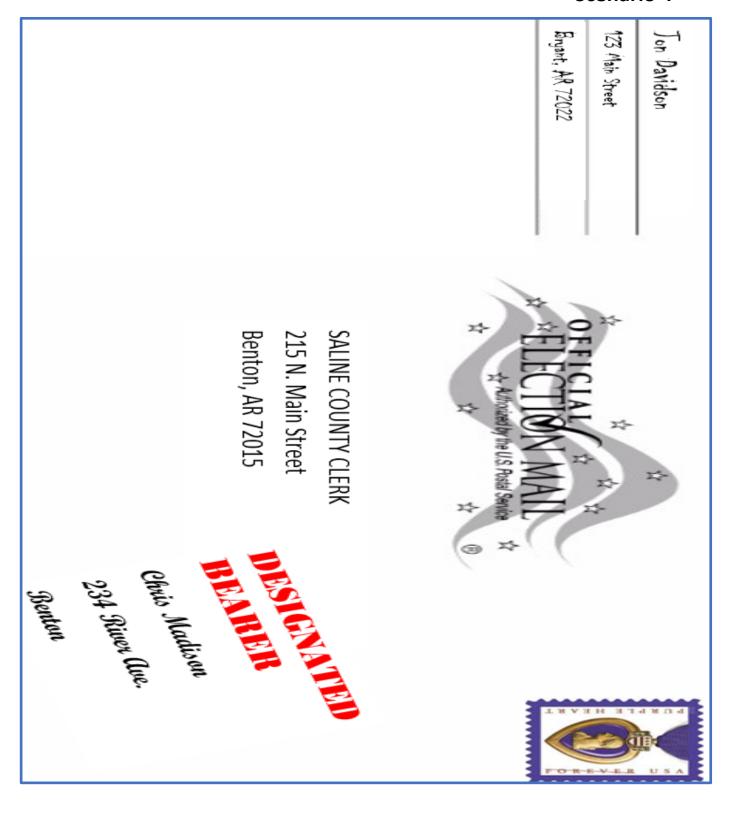
THE INFORMATION I HAVE PROVIDED IS TRUE TO THE BEST OF MY KNOWLEDGE UNDER PENALTY OF PERJURY. IF I HAVE PROVIDED FALSE INFORMATION, I MAY BE SUBJECT TO A FINE OF UP TO TEN THOUSAND DOLLARS (\$10,000) OR IMPRISONMENT FOR UP TO TEN (10) YEARS, OR BOTH, UNDER FEDERAL OR STATE LAWS.

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!



#### Scenario 4

# 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:

- My completed Voter Statement (This piece of paper)
- 2. Copy of my Required Photo ID
  - 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  Tow Davidsor  Must Complete for Your Ballot to be Counted!	Box 3: VOTER'S DATE OF BIRTH
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  123 Main Street	Box 4: Complete this Box if Your Ballot is Delivered by Any Third Party Other Than a Mail Service:  Daviel Shults  Printed Name of Designated Bearer, Agent, or Administrator  Daviel Lluts  Signature of Designated Bearer, Agent, or Administrator
Street Address  Bryart  City  Arkansas  State  Zip Code  Must Complete for Your Ballot to Be Counted!	Address of Designated Bearer, Agent, or Administrator  Bryart AR 72022  City State Zip Code

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.

Jan Davidson



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

Signature of Absentee Voter

# ARKANSAS APPLICATION FOR ABSENTEE BALLOT Revised 09/2021

TO COUNTY CLERK: Salive Co. Clark  215 N. Main Street  Benton, AR		DATE:
215 N. Main Street		REGISTRANT ID:
BESTON AVE		
INSTRUCTIONS TO VOTER: PLEASE MAKE ONLY O  1. PLEASE SELECT A REASON FOR REQUESTING	NE SELECTION FOR SECTIONS OF AN ABSENTEE BALLOT: In Election Day, OR because of an illness or physical disability, sility licensed by the state. TONS CONCERNING YOUR RESIDE registered to vote. Iterritorial limits of the United States (UOC armed services (UOCAVA). Indeed the United States armed services (UOCAVA). Indeed the UNITED TO CAST AN ABSENTEE B. Indeed the UNITED TO	, OR  NCE:  AVA).  UOCAVA).  ALLOT:
Special Election to be held on	(Date).	
care facility, or living outside of  All elections through the next Federal Go  In order to qualify for this optio  4. PLEASE SELECT HOW YOU WISH TO RECEIVE  I will pick up my ballot from the office of the count  Email (available for UOCAVA voters only). My em  Mail. Please send my ballot to the following address	n, you must be a UOCAVA voter (See Sec YOUR BALLOT: y clerk. nail address is:	vote.
Byowt, AR 72022  Picked up via Designated Bearer, Administrator, or		
Printed Name of Bearer/Administrator/Agent	Signature of Bearer/Administrato	r/Agent
Note: A designated bearer may obtain or deliver absentee ballo days before a school election, special election, preferential prim administrator, or authorized agent must provide a current and val- up or delivering an absentee ballot.	ary election, or general election OR the 7 days	before a runoff election. A bearer,
The information I have provided is true to the best of my knowledge us and subject to a fine of up to ten thousand dollars (\$10,000) or impris		
perjury that I am registered to vote, and that I am the person who is re	gistered to vote.	der federal faw. I certify under penalty (
123 Main St.	Date of Birth of Absentee Voter	
Residential Address of Absentee Voter		
Bryant, AR 72022	501-123-4530	
City, State, and Zip Code Journalton Davidson	Phone Number of Absentee Voter  Jonatha Daniel	
Printed Name of Absentee Voter		m
THINGE PRING OF AUSCINEE VOICE	Signature of Absentee Voter	

# 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:

- My completed Voter Statement (This piece of paper)
- 2. Copy of my Required Photo ID
  - 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.]

# 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

3. My Ballot Only Envelope Containing my Marked Ballot

BOX 1: VOTER'S PRINTED NAME  JON DavidSON	Box 3: VOTER'S DATE OF BIRTH  11 19 1968
Must Complete for Your Ballot to be Counted!	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)	Box 4: Complete this Box if Your Ballot is <u>Delivered</u> by Any Third Party Other Than a Mail Service:
AT WHICH I RESIDE* AND IS THE SAME ADDRESS I LISTED  ON MY APPLICATION FOR AN ABSENTEE BALLOT	Printed Name of Designated Bearer, Agent, or Administrator
P.O. Box 310 Street Address	Signature of Designated Bearer, Agent, or Administrator
City Arkansas 72021 State Zip Code	Address of Designated Bearer, Agent, or Administrator
MUST COMPLETE FOR YOUR BALLOT TO BE COUNTED!	City State Zip Code
Box 5: REQUIRED ABSENTEE VOTER STATEME	NT

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.

Jonathan Dandson
Signature of Absentee Voter



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

Jen Davidsen	ź	
123 Main Street	* * *	
Bryant, AR 72022	OFFICIAL & TO ELECTION MAIL Attraction to the U.S. Postal Service & TO ELECTION MAIL Attraction to the U.S. Postal Service & TO ELECTION & TO ELECTION MAIL & TO ELEC	
	SALINE COUNTY CLERK 215 N. Main Street Benton, AR 72015	IGNATED ARER
	P <sup>enb</sup>	Beyant

# Application for Absentee Ballot

You may qualify for:  All elections for one calendar year (i.e., today's date through December 31st of the cu on one of the cultify for this option, you must be a voter with a disability, in a learn facility, or living outside of the county in which you are registered to vo  All elections through the next Federal General Election Cycle. on order to qualify for this option, you must be a UOCAVA voter (See Section 1).	ong-term or residential te.
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:  Daviel Shults  Printed Name of Bearer/Administrator/Agent  Note: A designated bearer may obtain or deliver absentee ballots for no more than two (2) voters per election and days before a school election, special election, preferential primary election, or general election OR the 7 days before administrator, or authorized agent must provide a current and valid photo ID to the county clerk and must sign the regup or delivering an absentee ballot.	gent I may only do so within the 15 ore a runoff election. A bearer.
The information I have provided is true to the best of my knowledge under penalty of perjury. If I have provided false and subject to a fine of up to ten thousand dollars (\$10,000) or imprisonment for up to ten (10) years, or both, under perjury that I am registered to vote, and that I am the person who is registered to vote.    123   Main St	information, I may be guilty of perjury federal law. I certify under penalty of

VOTER'S MAILING (Secondary) ADDRESS

USE ONLY IF YOU REQUESTED YOUR BALLOT BE

## 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:

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

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.]

MAILED TO AN ADDRESS OTHER THAN YOUR SPECIAL REQUIREMENT FOR SOME FIRST TIME VOTERS: RESIDENTIAL ADDRESS LISTED IN BOX 2 Street Address / P.O. Box Zip Code City State My Ballot Only Envelope Containing my Marked Ballot

2, 2		
Box 1: VOTER'S PRINTED NAME	Box 3: VOTER'S DATE OF BIRTH	
Jon Davidson	11 19 1968	
Must Complete for Your Ballot to be Counted!	Month Day Year  Must Complete for Your Ballot to be Counted!	
Box 2: VOTER'S RESIDENTIAL VOTING ADDRESS	Box 4: Complete this Box if Your Ballot is <u>Delivered</u> by Any Third Party Other Than a Mail Service:	
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	Daniel Shults  Printed Name of Designated Bearer, Agent, or Administrator  Daniel Shults	
123 Main Street	Signature of Designated Bearer, Agent, or Administrator	
Street Address  Bryant Arkansas 72022  City State Zip Code	Address of Designated Bearer, Agent, or Administrator	
City State Zip Code	Bryant AR 72022 City State Zip Code	
Must Complete for Your Ballot to be Counted!	City State Zip Code	
BOX 5: REQUIRED ABSENTEE VOTER STATEME	NT  EST OF MY KNOWLEDGE UNDER PENALTY OF PERJURY. IF I	

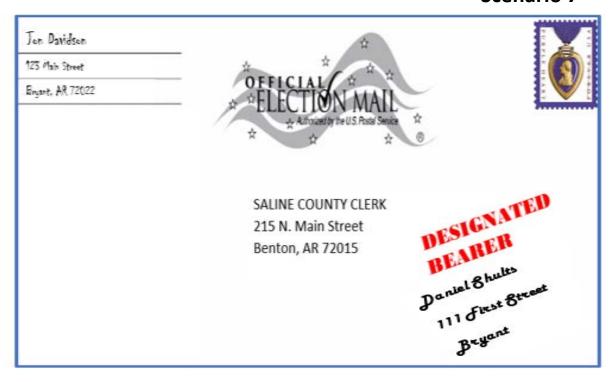
HAVE PROVIDED FALSE INFORMATION, I MAY BE SUBJECT TO A FINE OF UP TO TEN THOUSAND DOLLARS (\$10,000) OR IMPRISONMENT FOR UP TO TEN (10) YEARS, OR BOTH, UNDER FEDERAL OR STATE LAWS.

Jon Daviden	
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Signature of Absentee Voter



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



## **Application for Absentee Ballot**

You may qualify for:

	LECT HOW YOU WISH TO R		BALLOT:	~	
	k up my ballot from the office of		and the		
	vailable for UOCAVA voters only case send my ballot to the following		is is:		
		-E man east			
Picked m	n via Designated Banner, Adminis	tentos os Authorios	d Asserts		
i icked d	p via Designated Bearer, Adminis Tel Shults	trator, or Authorize	Daniel	- 0	

All elections for one calendar year (i.e., today's date through December 31st of the current year).

care facility, or living outside of the county in which you are registered to vote.

o In order to qualify for this option, you must be a voter with a disability, in a long-term or residential

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	11/19/68
Residential Address of Absentee Voter	Date of Birth of Absentee Voter
Bryant, AR 72022 City, Statle, and Zip Code	501-123-4530
City, Staffe, and Zib Code	Phone Number of Absentee Voter
Jonathan Davidson	Jonatha Daviden
Printed Name of Absentee Voter	Signar re of Absentee Voter

# 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:

- My completed Voter Statement (This piece of paper)
- Copy of my Required Photo ID
  - 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.]

VOTER'S MA	ILING (Secondary	) ADDRESS
USE ONLY IF Y	OU REQUESTED YOUR	R BALLOT BE
MAILED TO A	AN ADDRESS OTHER T	HAN YOUR
RESIDENT	IAL ADDRESS LISTED I	N BOX 2
NESIDENT	INTERPORTED EIGHT	T DONE
Street Address /		T DON'E

Scenario 7

My Ballot Only Envelope Containing my Marked Ballot

Box 1: VOTER'S PRINTED NAME	Box 3: VOTER'S DATE OF BIRTH		
200 Pavioson			
Must Complete for Your Ballot to be Counted!	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	Box 4: Complete this Box if Your Ballot is <u>Delivered</u> by Any Third Party Other Than a Mail Service:  Chris Madison  Printed Name of Designated Bearer, Agent, or Administrator		
123 main Street	Chr Male		
Tas hacito select	Signature of Designated Bearer, Agent, or Administrator		
Street Address	234 River Ave		
City Arkansas 72022  State Zip Code	Address of Designated Bearer, Agent, or Administrator		
Bryar + Arkansas 72022 City State Zip Code	Benton AR 72220		
Must Complete for Your Ballot to be Counted!	City State Zip Code		
Box 5: REQUIRED ABSENTEE VOTER STATEME	NT		

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.

Signature of Absentee Voter



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