

Absentee By-Mail Ballot Application for the November 3, 2020 Election

Deadline to Accept an Application: **October 27, 2020**

STEP 1: Provide all of the information below. Please print.

Your Full Legal Name:

Address Where You Live:

| | | |
|---|--------|---------|
| City: | ZIP: | County: |
| Date of Birth: | Phone: | |
| Full Social Security #: | Email: | |
| Address to Mail the Ballot: <input type="checkbox"/> Same as above | | |
| City: | State: | ZIP: |

STEP 2: Check your reason for applying to vote by-mail.

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| <input type="checkbox"/> I am 60 years of age or older. |
| <input type="checkbox"/> I will be outside my county during all hours of early voting and on Election Day. |
| <input type="checkbox"/> I am hospitalized, ill or physically disabled and unable to appear at my polling place to vote (this includes persons who have underlying medical or health conditions which in their determination render them more susceptible to contracting COVID-19 or at greater risk should they contract it). |
| <input type="checkbox"/> I am a caretaker of a hospitalized, ill or physically disabled person (this includes caretakers for persons who have underlying medical or health conditions which in their determination render them more susceptible to contracting COVID-19 or at greater risk should they contract it). |
| <input type="checkbox"/> I am a full-time student or spouse of a full-time student outside my county. |
| <input type="checkbox"/> I reside in a licensed facility, outside my county, providing relatively permanent domiciliary care, i.e. Nursing Home. |
| <input type="checkbox"/> I am a candidate for office in the election. |
| <input type="checkbox"/> I am observing a religious holiday that prevents me from voting during early voting or on Election Day. |
| <input type="checkbox"/> I will be serving as an election official or a member or employee of the election commission on Election Day. |
| <input type="checkbox"/> I will be serving on jury duty. |
| <input type="checkbox"/> I am a voter with a disability and my polling place is inaccessible. |
| <input type="checkbox"/> I have a CDL or TWIC or I am a spouse of a person with a CDL or TWIC and will be out of the county during early voting and Election Day. Enclosed is a copy of the CDL or TWIC (required) and the number is: _____. |
| <input type="checkbox"/> I am a member of the military, spouse, or dependent. |
| <input type="checkbox"/> I am an activated National Guard member on state orders. |
| <input type="checkbox"/> I am an overseas citizen and otherwise qualified to vote in TN. |

You must include a mailing address outside the county, even if the ballot is emailed.
Send military/overseas ballot by: Mail or Email
If email, provide email address above.

STEP 3: Read the following statement and sign this form.

I swear or affirm, under the penalty of perjury, that all of the information on this form is true and correct and that I am eligible to vote in the election.

| | |
|--|--------------|
| Voter's Signature: (Digital Signature Not Accepted) X | Date: |
|--|--------------|

Assistance Signatures (only required if voter cannot sign their own name):

| | | |
|-------------------------------|---------|------|
| Signature of Person Assisting | Address | Date |
| Signature of Witness | Address | Date |

STEP 4: Submit your application.

You may submit this form by mail, fax or email to the Monroe County Election Commission. When emailing, you must scan and attach the completed form to Monroe.Commission@tn.gov. Fax your completed form to 423-442-9432. Mail your completed form to P.O. Box 397, Madisonville, TN 37354. Your application must be received by **October 27, 2020**.

NOTICE: You may be eligible for a reward of up to \$1,000 if you make a report of voter fraud that leads to a conviction. Call the state election coordinator's Voter Fraud Hotline at 877-850-4959 to report voter fraud.

ELECTION OFFICE USE ONLY

APPROVED / REJECTED DATE _____ BY _____ BALLOT SENT DATE _____ BALLOT RECEIVED DATE _____