

ABSENTEE BALLOT APPLICATION

I hereby apply for absentee ballots for *(check one)*

Primary Election General Election Primary & General Election SPECIAL ELECTION

I will need an absentee ballot for the following reason: *(check one)*

absent from precinct illness or disability service as election judge in another precinct
 religious discipline or observation of religious holiday

NAME <i>(please print)</i> _____		
MY LEGAL RESIDENCE ADDRESS IS:		
Street _____	Apartment # or Rural Box # _____	
City () Township () <i>(check whichever is applicable)</i> _____	County _____	Zip Code _____
My date of birth is: ____/____/____	Telephone number <i>(optional)</i> (____)____-____	
MN Driver's License number or MN State ID card number <i>(optional)</i> _____		

MAIL MY ABSENTEE BALLOT TO ME AT THE FOLLOWING ADDRESS:		
Street _____	Apartment# or Rural Box # _____	
City _____	State _____	Zip Code _____
Legal Signature: _____	Date _____	

OFFICE USE ONLY	
Date _____	MAILED _____ RECEIVED IN PERSON _____
VOTER ID# _____	MCD/PREC# _____
BALLOT GROUPS: _____	CITY/TOWN & PREC. _____
DON DICKLICH, COUNTY AUDITOR	Clerk of City/Town _____
By _____	Signature _____
Deputy	

PLEASE MAIL APPLICATION TO: ST. LOUIS COUNTY SCHOOLS, ISD #2142
1701 NORTH 9TH AVENUE
VIRGINIA, MN 55792