

ATTENTION _____ COUNTY ELECTION COMMISSION

Mail, fax or email completed request to your county election commission

I formally "Request an Absentee Ballot" based upon the following information.

1) PRINT NAME _____

2) ADDRESS WHERE YOU LIVE _____

3) MAIL MY ABSENTEE BALLOT TO THIS ADDRESS _____

4) SOCIAL SECURITY # _____ 5) DATE OF BIRTH _____

6) I WISH TO VOTE IN THE: General Election Primary Election (Republican Democratic) or Other

7) REASON FOR VOTING ABSENTEE (Check One)

- I am over 60 years of age.
I am a voter covered under the Uniformed and Overseas Citizen Absentee Voting Act (must include mailing address outside county even if emailing ballot).
Ballot to be sent: By-Mail Email: email address _____
I will be outside of this county during all hours of early voting and Election Day (must include mailing address outside county).
I am enrolled as a full-time student (or spouse of a student) at an institution inside Tennessee and outside the county where I am registered (must include mailing address outside county).
I am a voter with a disability and my polling place is inaccessible.
I reside in a licensed facility, outside the county, providing relatively permanent domiciliary care, i.e. Nursing Home (must include mailing address outside county).
I am hospitalized, ill or physically disabled and because of such condition, I am unable to appear at my polling place for this election.
I am a caretaker of a person who is hospitalized, ill or physically disabled.
I am a candidate.
I am on jury duty in a state or federal court.
I am serving as an election official or a member or employee of the election commission on Election Day.
I am observing a religious holiday that prevents me from voting early or on Election Day.
I have a Commercial Drivers License (CDL) (or spouse of a person possessing a CDL) or a Transportation Worker Identification Credential (TWIC), will be out of county during early voting & Election Day, & have no specific out-of-county or out-of-state address to receive mail during this time. Enclosed is a copy of my CDL or my spouse's CDL or my TWIC card. The CDL # is _____.

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

8) SIGNATURE OF VOTER _____

If voter is unable to sign their name or make a mark, the person assisting and one witness must also sign their names and provide their addresses.
1. _____ 2. _____
Name and address of person assisting Name and address of person witnessing

FOR COUNTY ELECTION OFFICE USE ONLY:
(Circle One) This Request has been: Approved OR Rejected on _____ by _____
Voting Precinct/District _____ Application Signature verified on _____ by _____
Ballot Sent _____ Ballot Received _____
Ballot Affidavit Signature verified on _____ by _____