	STATE OF LOWA	OFFICIAL ABSENTEE BALLOT REQU	ECT FORM	FOR OFFICE HEE ONLY	
				FOR OFFICE USE ONLY Mail to:	
	Last	Suff	ix	Linn County Election Services	
YOUR NAME AND DATE OF BIRTH	First	Middle		935 2nd Street SW	
DATE OF BIRTH	Date of Birth (month, day, year)	/		Cedar Rapids, IA 52404 Revised July 2020	
	Iowa Driver's License or Non-Operator ID Number:		Voters who do not appear in the Iowa Dept. of		
ID NUMBER	OR			Transportation's Driver's License or Non-Operator ID files are mailed an Iowa Voter	
Complete one	Four-digit Voter PIN (found only on Voter Identification Card): Identification Card at the time of registratic Any voter may request a Voter Identification				
Your Iowa	Home Street Address (include apt, lot, etc. if applicable)				
RESIDENTIAL	City Zip County				
ADDRESS				ote in the county, this form will be used to update our reaistration record.	
<u></u> .	· · · · · · · · · · · · · · · · · · ·	your voter registration if the information provided on this form is different than the information on your registration record.			
WHERE YOUR ABSENTEE BALLOT	Mailing Address/P.O. Box			_	
ABSENTEE BALLOT SHOULD BE MAILED	City	State		Zip	
If different than above	Country (other than USA)				
CONTACT INFO		F28		DO NOT ADD THIS INFORMATION	
Important ELECTION DATE OR	Phone	Email		☐ TO MY VOTER RECORD	
TYPE TYPE	Election Date:/	□ □ □ □ □ □ □ □ □ City/S	- · · □ spacial•		
Choose only one election	OR General	Primary City/S	School Special:		
PRIMARY ELECTION ONLY	Check one political party	☐ Democratic ☐ Repu	blican		
REQUESTER AFFIDAN	I swear or affirm that I am th	e person named above and I am a regis	tered voter or I am enti	tled to register at the address listed on this form.	
Powers of attorney do not	•••	am eligible to receive and vote an abse			
have legal authority to request an absentee ballot	V				
on behalf of another.	Signature: X			Date	
	STATE OF JOWA	DEFICIAL ARSENTEE BALLOT REQU	EST FORM	For Office Use Only	
		OFFICIAL ABSENTEE BALLOT REQU		FOR OFFICE USE ONLY Mail to:	
A CONTRACT AND	STATE OF IOWA (Suff		Mail to: Linn County Election Services	
YOUR NAME AND				Mail to: Linn County Election Services 935 2nd Street SW	
YOUR NAME AND DATE OF BIRTH	Last	Suff Middle		Mail to: Linn County Election Services 935 2nd Street SW Cedar Rapids, IA 52404	
DATE OF BIRTH	<u>Last</u> <u>First</u>	Suff Middle		Mail to: Linn County Election Services 935 2nd Street SW	
	Last First Date of Birth (month, day, year)	Suff Middle		Mail to: Linn County Election Services 935 2nd Street SW Cedar Rapids, IA 52404 Revised July 2020	
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ABSENTEE BALLOT REQUEST FORM INSTRUCTIONS

A registered voter may make written application to the Linn County Elections Office for an absentee ballot. A written application for a mailed absentee ballot must be received by the Linn County Elections Office no later than 5 p.m. 10 days before a General Election or 11 days before any other election.

In order to receive an absentee ballot, a registered voter <u>MUST</u> provide the following necessary information:

Name

- 1. Date of birth
- 2. Iowa residential address
- 3. Voter Verification Number (ID Number)
 - a. Iowa Driver's License or Non-Operator ID Number OR
 - Four digit Voter PIN located on the voter's lowa Voter ID Card Any voter may request an lowa Voter ID Card by contacting the Linn County Elections Office.
- 4. The name OR date of the election for which you are requesting an absentee ballot
- 5. **Party affiliation** only required for Primary Elections, which are held in even numbered years
- 6. Signature

All voters are encouraged to provide their phone number and/or email address in the event the Linn County Elections Office needs to confirm any information on the request form.

If you have questions about absentee voting, please contact our office at 319-892-5300 EXT. 1 or elections@linncounty.org.

You can mail your completed absentee ballot request form to:

Linn County Election Services 935 2nd Street SW Cedar Rapids, IA 52404