



VOTE BY MAIL BALLOT REQUEST FORM

THIS FORM MAY BE MAILED OR FAXED TO:

MICHAEL BENNETT, SUPERVISOR OF ELECTIONS
PO BOX 1000, BRADENTON FL 34206-1000
TELEPHONE: (941) 741-3823 FAX: (941) 741-3820

If you want your ballot mailed to an address other than your voter registration address, Florida law requires that you complete a written and signed request form. Vote By Mail Ballots CANNOT be Forwarded.

Notice: Information provided on this form is exempt from public disclosure except that it is available upon request to canvassing boards, election officials, political parties, political committees, committees of continuous existence and candidates facing opposition in an upcoming election. (s. 101.62(3), F.S.)

Select elections for which you are requesting a ballot:

_____ Presidential Preference Primary – March 15, 2016

_____ Primary Election – August 30, 2016

_____ General Election – November 8, 2016

_____ All elections through the next two (2) General Elections for which I am eligible to vote

_____ Other (please specify _____)

Name of Voter (Last / First / Middle)

Date of Birth FL Driver's License # OR last 4 digits of SS# Daytime Telephone Number

Current Manatee County Residence Address City State Zip Code

Address Where Ballot Will Be Mailed (if different from above) City State Zip Code

Signature of Voter Date of Request

REQUESTOR'S INFORMATION:

Complete this portion ONLY if requesting the ballot for someone other than yourself

(Note: Only an immediate family member or legal guardian may request an absentee ballot on behalf of another):

Last Name First Name Middle

Date of Birth FL Driver's License # OR last 4 digits of SS# Daytime Telephone Number

Address City State Zip Code

Relationship to Voter Date Signature of Requestor