



**ABSENTEE BALLOT APPLICATION
FOR ABSENT UNIFORMED SERVICES VOTER
OR OVERSEAS VOTER TO VOTE BY FAX OR EMAIL**

State Form 51262 (R/11-06)
Indiana Election Commission (IC 3-11-4-6; 3-11-4-7)

(ABS-12)

To the county election board:

I affirm that I am a registered voter at the address indicated below, and I am either an absent uniformed service voter or an overseas voter who was otherwise qualified to vote in the precinct where I resided before I left the United States, and I request an absentee ballot to be sent to me by facsimile (FAX) or email and returned by me to the county election board by FAX or email.

(NOTE: If you vote by FAX or email, you will be required to sign a statement on the cover sheet acknowledging your understanding that you are voluntarily waiving your right to a secret ballot. A voted absentee ballot sent by email must be transmitted to the county election board in accordance with the procedures established by the United States Department of Defense.)

If this application is for a PRIMARY ELECTION , check the political party ballot that you are requesting: <input type="checkbox"/> DEMOCRATIC <input type="checkbox"/> REPUBLICAN OR <input type="checkbox"/> Check School Board Only AND/OR <input type="checkbox"/> Public Question Only <i>(these options may not be available in all precincts).</i>
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Name of Voter		Voter's Date of Birth (mm/dd/yy) ____/____/____	
Voter Identification Number <i>(optional) (Indiana issued driver's license number, OR if voter does not possess driver's license, provide last 4 digits of social security number)</i>			
Voter's Registration Address		City	Zip Code
Voter's Telephone Number ()	Voter's FAX Number ()	Voter's e-mail address	
Voter's Mailing Address <i>(If different from registration address)</i>		City	Zip Code

Voter's Signature	Date (mm/dd/yy) ____/____/____
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FOR OFFICE USE ONLY		
Date (mm/dd/yy) ____/____/____		
Precinct:		