

# APPLICATION FOR MUNICIPAL ABSENTEE BALLOT

FORM AV-M1  
Date Revised 09/03/2019

Return this application to: Annette Barnes, City Clerk  
City of Athens  
P.O. Box 1089  
Athens, AL 35612

\_\_\_\_\_ COUNTY, ALABAMA

Please note that only one application may be placed in the same envelope.

**Please note that a copy of your valid photo identification must be submitted along with this application.**

**General Voter Information - Please provide complete information so that we may verify your eligibility to vote.**

|   |  |                       |  |                       |  |                |  |   |  |                               |  |
|---|--|-----------------------|--|-----------------------|--|----------------|--|---|--|-------------------------------|--|
| Last Name (Please print)  |  | First Name            |  | Middle or Maiden Name |  | E-mail Address |  |   |  |                               |  |
| Street Address (address where you are registered to vote; do not use PO box)                                      |  |                       |  |                       |  | City           |  | ZIP                                     |  |                               |  |
| Mail my ballot to the address where I regularly receive mail, if different from the street address provided above |  |                       |  |                       |  |                |  |   |  |                               |  |
| Precinct where you vote (name and/or location of your polling place)  |  |                       |  |                       |  |                |  |   |  |                               |  |
| Date of Birth   |  | Month                 |  | Day                   |  | Year           |  | Driver's License Number                 |  | IF NO DRIVER'S LICENSE NUMBER |  |
| Home Telephone Number   |  | Work Telephone Number |  | STATE                 |  | NUMBER         |  | Last 4 digits of Social Security number |  | [ ] [ ] [ ] [ ]               |  |

**For all registered voters**

**I hereby make application for an absentee ballot so that I may vote in the following election:**

- Municipal Election
  Special Municipal Election (specify) \_\_\_\_\_  
 Municipal Runoff Election

**■ Absentee ballots for municipal elections more than 42 days apart must be requested on separate applications**

**I am applying for an absentee ballot because (check at least one box):**

- I expect to be out of the county or the state on election day.
- I have a physical illness or infirmity which prevents my attendance at the polls. [ID Required]
- \*I have a physical illness or infirmity which prevents my attendance at the polls. I am unable to access my assigned polling place due to a neurological, musculoskeletal, respiratory (including speech organs), cardiovascular, or other life-altering disorder that affects my ability to perform manual tasks, stand for any length of time, walk unassisted, see, hear or speak and:
  - a) I am an elderly voter aged 65 or older; or
  - b) I am a voter with a disability.

*\*ID Not Required*
- I expect to work a shift which has at least ten (10) hours that coincide with the polling hours at my regular polling place.
- I am enrolled as a student at an educational institution located outside the county of my personal residence, attendance at which prevents my attendance at the polls.
- I am a member of, or a spouse or dependent of a member of, the Armed Forces of the United States or am otherwise similarly qualified to vote absentee pursuant to the Uniformed and Overseas Citizens Absentee Voting Act, 52 U.S.C. § 20302.  
 This application for an absentee ballot will be valid for all county, state, and federal elections held during this calendar year unless you specify an earlier expiration date here: \_\_\_\_\_. [ID Not Required]
- I have been appointed as an election officer at a polling place which is not my regular polling place.
- I am a caregiver for a family member to the second degree of kinship by affinity or consanguinity and the family member is confined to his or her home.
- I am currently incarcerated in prison or jail and have not been convicted of a felony involving moral turpitude. (See back for felonies involving moral turpitude.)

**When I apply for this absentee ballot, I understand that my name will be stricken from the list of qualified electors and, when I cast this absentee ballot, I understand that I will not be entitled to vote at my regular polling place.**

|                   |  |                    |
|-------------------|--|--------------------|
| Voter's Signature | Complete this section if voter signs by mark → | Witness Signature  |
|                   |  | Print Witness Name |

The voter may hand this application to the Absentee Election Manager. The voter may also forward this application to the Absentee Election Manager by U.S. Mail or commercial carrier [§17-11-3 and §17-11-4, Code of Alabama, 1975].

**READ PENALTIES ON BACK**