

REQUEST FOR ABSENTEE BALLOT

TO: GAYLE V. TROTTER
MALHEUR COUNTY CLERK
251 B ST WEST, STE #4
VALE OR 97918
PHONE: (541) 473-5151 (8:30am to 5:00pm Mtn Time)

FOR OFFICE USE ONLY

Elector # _____
Precinct _____
Tax Code _____
Party _____
Absentee Code _____

COUNTY ADDRESS:

I, _____, reside at the following Malheur County address:
NAME _____

_____ **MALHEUR COUNTY RESIDENCE/PHYSICAL ADDRESS**

Date of Birth _____

Phone: _____

Email: _____

☐

I would like to be an absentee voter for the ☐ **PRIMARY** ☐ **GENERAL** ☐ **SPECIAL** Election held on _____ (This election only.)

☐

Military Voter / Overseas US Citizen (Ballots mailed 45-days before each election)

☐

Student / Missionary - I would like to be an absentee voter for all elections held from _____
thru _____. (Out of State/Oregon ballots mailed 29-days before each election)

☐

Winter Address Only: from _____ To _____ Only. Every year until notified otherwise.
(Out of State/Oregon ballots mailed 29-days before each election)

☐

I would like to be a permanent absentee voter (for all future elections). (Oregon is a Vote-By-Mail State)

REASON: _____

MAIL absentee ballot to:

OR pick up ballot at the Clerk's office

By _____

I am not requesting a ballot from any other state or county, and am not voting in any other manner in the election. By signing this absentee ballot request, I certify that I am a duly registered elector of MALHEUR COUNTY and that all information I have supplied is true to the best of my knowledge.

VOTER SIGNATURE

DATE

NOTICE:

Return this application immediately for processing. Ballots can not be mailed out the last 5 days prior to any election, but may be picked up at the Clerk's office. Your voted ballot must be received by this office not later than 8:00 pm election day using any means other than USPS or be legibly postmarked by USPS by election day, to be counted.

E-mail addresses: gayle.trotter@malheurco.org or elections@malheurco.org FAX: 541-473-5523