Instructions

You may request a replacement ballot only if you have not already submitted your voted ballot for this election. Possible reasons for requesting a replacement ballot include:

- \rightarrow you make a mistake (you vote for the wrong candidate, you overvote, etc.)
- \rightarrow your ballot is damaged or spoiled (it is torn, something spilled on it, etc.)
- you lose your ballot \rightarrow

or

...

for any other reason.

Return this request to your County Elections Office by fax or in person. Replacement ballots will be delivered by mail no later than 5 days before the day of the election. If you need a replacement ballot within the 5 days before the election, you will need to pick it up in person. If you have any questions:

call 1 866 ORE VOTE/673 8683 se habla español	visit	<u>www.ore</u>	<u>onvotes.gov</u>	ti	y 1 800 735 2900 for the hearing impaired	
Voter Information please print						
Last Name		First	Name	Mid	dle Name	
Home Address, Street/Route required		Apartment or Space Number if applicable				
City		State	Zip		County of Residence	
Date of Birth Phone Number optional					I	
Mailing Address, Street/Route required if different from home address						
City		State		Zip		
Replacement Information please print						
Please list your reasons for requesting a replace	ement ballo	t				
Signature						

Sign Here		Date Signed
For Office Use Only		
Request for Replacement Ballot	Granted	Denied (list reason below)