



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