

West Virginia Absentee Ballot Application

Instructions: Eligible voters may apply for an absentee ballot beginning January 1st or 84 days before the election, whichever is earlier. Voters must apply separately for each election. Voters eligible under section A, number 4 must fill out this application in their own handwriting, unless receiving assistance. Complete the steps below, then mail, fax, or e-mail your application to your County Clerk. He or she must receive your application by the sixth day before the election. Visit GoVoteWV.com for contact information. Military and overseas voters should apply using the Federal Postcard Application.

1 Print your name Last _____ First _____ Middle _____ Suffix _____

2 Your current WV residence address and date of birth Street (not P.O. Box) _____ County: _____
 City _____ State WV Zip Code _____ Date of Birth ____/____/____

3 Where should we mail your ballot? Address _____ Phone _____
 City _____ State _____ Zip Code _____

A. I am applying for a paper ballot by mail because I am not able to vote in person during Early Voting or on Election Day due to:

- Illness, injury or other medical reason which keeps me confined.
- Immobility due to advanced age or a physical disability.
- Incarceration or detention in jail or home. I am not under conviction of any felony, of treason or of bribery in an election (including any period of probation or parole). If selected, you must complete the statement on Page 2 of this form.
- Employment which because of hours worked and distance from the county seat makes voting in person impossible.
- I am a participant in the Address Confidentiality Program (ACP) with the Office of the Secretary of State. If selected, send your application to the Secretary of State's Office.

Eligibility:

4 Choose one from section A or B

- The county absentee voting office and my polling place are inaccessible to me due to my physical disability.
- Personal business or travel. If selected, your ballot must be mailed outside of your county of residence.
- Attendance at college, university, or other place of education or training. If selected, your ballot must be mailed outside of your county of residence.
- Temporarily living outside of the county due to serving as an elected or appointed federal or state officer. If selected, your ballot must be mailed outside of your county of residence.
- Temporarily living outside of the county due to a temporary assignment by my employer for a specific period of four years or less. If selected, your ballot must be mailed outside of your county of residence.

B. I am applying for an electronic absentee ballot due to:

- A physical disability that prevents me from voting in person and from voting a paper ballot without assistance.

If selected, enter your email address: _____

5 Ballot Information

Election: <input type="checkbox"/> Federal/State/County <input type="checkbox"/> City/Town/Village (If election date is different than the federal/state/county election, submit this application to your municipal clerk/recorder.)	Election Type (choose one): <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Special Election	For Primary Elections only (choose one): <input type="checkbox"/> Democrat <input type="checkbox"/> Republican <input type="checkbox"/> Mountain <input type="checkbox"/> Non-Partisan
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If you are registered with the Democrat, Republican, or Mountain Party, you may only receive that party's primary ballot.
 Libertarian Party members may only receive the non-partisan ballot for the primary election because they are nominating by convention.

6 Declaration

I do hereby certify the information given above is true to the best of my knowledge, that I reside at the address given, and that I am qualified and registered to vote in this county. I understand that I must vote in person if I can. I understand that making a false statement on this application is a crime punishable by a fine up to \$1000 and up to one-year imprisonment. If I require assistance with my ballot, the reason for the assistance is stated below and the person who will assist me has signed the oath on number 7 of this form.

Signature/mark of voter (if mark, witness must sign) **X** _____ Date: _____
 Signature of witness to voter's mark (if needed) _____ Date: _____
 Reason for assistance (if needed): _____

7 Oath of Voter's Assistant (if needed)

I, a person giving assistance to the voter above and signing below, hereby swear or affirm, under penalty of law, that: I will not in any manner request, persuade or induce the voter I am assisting into voting for someone other than the candidate of the voter's choice; and I will not keep or make any memorandum or entry of anything, directly or indirectly, nor reveal to any person the name of any candidate or issue voted for by the voter or which ticket he or she voted except when required pursuant to law to give testimony as to the matter in a judicial proceeding.

Signature of person assisting voter _____ Date: _____