OFFICIAL ABSE	NTEE BALL	OT APPLICA	TION/	CERTI	<u>FICATION</u>	
(Official Use Only) The voter has met or is exempt from the photo ID requirement. Municipal or Deputy Clerk initial here:						
Note: With certain exceptions, an elector who mails or personally delivers an absentee ballot to the municipal clerk at an election is not permitted to vote in person at the same election on Election Day. Wis. Stat. §6.86(6).						
Voter: Please complete steps 1 through 5 below, in the presence of your witness.						
Place your voted ballot inside the envelope and seal it. Do not use tape or glue.						
Complete the section below if not completed by the clerk. Provide your VOTING address.						
Date of Election (mon	th, day, year)		County	/		
		·				
Municipality (check ty	ype and list nam	ie) Iown □	Villag	ge □	City of	
Voter's Name (Last, First, Middle) including suffix (Please print legibly)						
Street Address-Provide house number and street name or fire number and street name. OR						
If your rural address d	loes not include a	house number	fire nun	nber and	street name, provide rural ro	ute
number and box no.						
City					Zip Code	
				WI		
Official use only:	Ward #	District (if appli	cable)		Voted in clerk's office	
3 Sign and date this section.						
CERTIFICATION OF VOTER (Required) I certify, subject to the penalties for false statements of Wis. Stat. § 12.60(1)(b), that I am a resident of						
the ward of the municipality in the county of the state of Wisconsin indicated hereon, and am entitled to						
vote in the ward at the election indicated hereon; that I am not voting at any other location in this election;						
that I am unable or unwilling to appear at the polling place in the ward on election day, or I have changed my residence within the state from one ward to another later than 28 days before the election. I certify						
that I exhibited the enclosed ballot, unmarked, to the witness, that I then in the presence of the witness						
and in the presence of no other person marked the ballot and enclosed and sealed the ballot in this						
envelope in a manner that no one but myself and any person providing assistance under Wis. Stat. § 6.87(5), if I requested assistance, could know how I voted. I further certify that I requested this ballot.						
X						
▲ Signature of V	•				Foday's Date	
REQUIRED OF MILITARY AND OVERSEAS VOTER ONLY: I further certify my birth date is:						
Have your witness sign and write their address below.						
CERTIFICATION OF WITNESS (signature and address of witness are required)						
I, the undersigned witness, subject to the penalties for false statements of Wis. Stat. § 12.60(1)(b), certify that I am an adult U.S. Citizen and that the above statements are true and the voting procedure						
was executed as stated. I am not a candidate for any office on the enclosed ballot (except in the case						
of an incumbent municipal clerk). I did not solicit or advise the voter to vote for or against any candidate or measure. I further certify that the name and address of the voter is correct as shown.						
1.						
▲ Signature of ONE adult U.S. citizen witness▲						
2						
▼ Address of witness or addresses of both SVDs ▼						
1						
2						
Provide house number and street name or fire number and street name, city, state and zip code. OR If your rural address does not include a house number/fire number and street name, provide rural route number and box number, city, state and zip code.						
CERTIFICATION OF ASSISTANT (if applicable) - assistant may also be witness						
I certify that the voter named on this certificate is unable to sign his/her name or make his/her mark due to a physical disability and that I signed the voter's name at the direction and request of the voter.						
X						
▲ Signature of As		4.5.1. 5				
Mail back your ballot. Allow 4-5 days for delivery to ensure your ballot is received by Election Day. Ballots received after Election Day will NOT be counted.						