Wisconsin Application for Absentee Ballot

Absentee ballots may also be requested at MyVote.wi.gov

Instructions
Detailed instructions for completion are on the back of this form. Return this form to your municipal clerk when completed.

- You must be registered to vote before you can receive an absentee ballot. You can confirm your voter registration at https://myvote.wi.gov

PHOTO ID REQUIRED, unless you qualify for an exception. See instructions on back for exceptions.

VOTER INFORMATION

1 Municipality ○ Town ○ Village ○ City ○ County

2 Last Name ○ First Name ○ Middle Name ○ Suffix (e.g., Jr, II, etc.) ○ Date of Birth (MM/DD/YYYY)

Phone ○ Fax ○ Email

3 Residence Address: Street Number & Name

Apt. Number ○ City ○ State & ZIP

4 Fill in the appropriate circle – if applicable (see instructions for definitions):

○ Military ○ Permanent Overseas ○ Temporary Overseas

I PREFER TO RECEIVE MY ABSENTEE BALLOT BY:

○ MAIL Mailing Address: Street Number & Name

○ VOTE IN CLERK’S OFFICE Apt. Number ○ City ○ State & ZIP

○ Care Facility Name (if applicable)

○ C / O (if applicable)

○ FAX Fax Number ○ For Military and Overseas Voters Only

○ EMAIL Email Address ○ For Military and Overseas Voters Only

Voter must have a computer and printer when receiving a ballot by fax or email. Voted ballots must be returned by mail.

I REQUEST AN ABSENTEE BALLOT BE SENT TO ME FOR:

○ The election(s) on the following date(s):

○ All elections from today’s date through the end of the current calendar year (ending 12/31).

For indefinitely-confined voters only: I certify that I am indefinitely confined because of age, illness, infirmity or disability and request absentee ballots be sent to me automatically until I am no longer confined, or I fail to return a ballot. Anyone who makes false statements in order to obtain an absentee ballot may be fined not more than $1,000 or imprisoned not more than 6 months or both. Wis. Stats. §§ 12.13(3)(i), 12.60(1)(b).

TEMPORARILY HOSPITALIZED VOTERS ONLY (please fill in circle)

○ I certify that I cannot appear at the polling place on election day because I am hospitalized, and appoint the following person to serve as my agent, pursuant to Wis. Stat. § 6.86(3).

Agent Last Name ○ Agent First Name ○ Agent Middle Name

AGENT: I certify that I am the duly appointed agent of the hospitalized absentee elector, that the absentee ballot to be received by me is received solely for the benefit of the above named hospitalized elector, and that such ballot will be promptly transmitted by me to that elector and then returned to the municipal clerk or the proper polling place.

Agent Signature X Agent Address

ASSISTANT DECLARATION / CERTIFICATION (if required)

I certify that the application is made on request and by authorization of the named elector, who is unable to sign the application due to physical disability.

Agent Signature X Today’s Date

VOTER DECLARATION / CERTIFICATION (required for all voters)

I certify that I am a qualified elector, a U.S. Citizen, at least 18 years old, having resided at the above residential address for at least 28 consecutive days immediately preceding this election, not currently serving a sentence including probation or parole for a felony conviction, and not otherwise disqualified from voting. Please sign below to acknowledge that you have read and understand the above.

Voter Signature X Today’s Date
Wisconsin Application for Absentee Ballot Instructions

General Instructions: This form should be submitted to your municipal clerk, unless directed otherwise.
- This form should only be completed by registered voters; if you are not a registered voter or military elector, please submit a Voter Registration Application (EL-131) with this form.

Photo ID requirement: If you will receive your absentee ballot by mail, and have not previously provided a copy of acceptable photo ID with a prior by-mail absentee ballot request, a copy of photo ID must accompany this application. You may submit your application and a copy of your ID by mail, fax or email. In-person voters must always show acceptable photo ID.

The following documents are acceptable Photo ID (For specific information regarding expired documents visit http://bringit.wi.gov):

- State of WI driver license or ID card
- Military ID card issued by a U.S. uniformed service
- Photo ID issued by the federal Dept. of Veterans Affairs
- University, college or tech college ID and enrollment verification
- U.S. passport booklet or card

In lieu of photo ID, the voters listed below may satisfy the voter ID requirement by the following means:
- Electors who are indefinitely confined (see Section 6) – the signature of a witness on the Absentee Certificate Envelope.
- Electors residing in care facilities served by Special Voting Deputies – the signatures of both deputies on the envelope.
- Electors residing in care facilities not served by Special Voting Deputies – the signature of an authorized representative of the facility.
- Military, Permanent Overseas and Confidential Electors – Exempt from the photo ID requirement.

1. Indicate the municipality and county of residence. Use the municipality’s formal name (for example: City of Ashland, Village of Greendale, or Town of Albin).

2. Provide your name as you are registered to vote in Wisconsin. If applicable, please provide your suffix (Jr, Sr, etc.) and/or middle name. If your current name is different than how you are registered to vote, please submit a Voter Registration Application (EL-131) with this form to update your information.

3. Provide your home address (legal voting residence) with full house number (including fractions, if any). Provide your full street name, including the type (eg., Ave.) and any pre- and/or post-directional (N, S, etc.). Provide the city name and ZIP code as it would appear on mail delivered to the home address.

4. A “Military elector” is a person, or the spouse or dependent of a person who is a member of a uniformed service or the merchant marines, a civilian employee of the United States, a civilian officially attached to a uniformed service and serving outside the United States, or a Peace Corp volunteer. Military electors do not need to register to vote.

5. A “Permanent Overseas elector” is a person who is a United States citizen, 18 years old or older, who resided in Wisconsin immediately prior to leaving the United States, who is now living outside the United States and has no present intent to return, who is not registered in any other location, or who is an adult child of a United States citizen who resided in this state prior to establishing residency abroad. Permanent Overseas electors will receive ballots for federal offices only and must be registered to vote prior to receiving a ballot.

6. A “Temporary Overseas elector” is a person who is a United States citizen, 18 years of age or older, a resident of Wisconsin and is overseas for a temporary purpose and intends to return to their Wisconsin residence.

7. A “Military elector” who is currently hospitalized may request absentee voting. Complete the form for a hospitalized elector must provide his/her name, signature and address on this application.

8. A “Military elector” is a person, or the spouse or dependent of a person who is a member of a uniformed service or the merchant marines, a civilian employee of the United States, a civilian officially attached to a uniformed service and serving outside the United States, or a Peace Corp volunteer. Military electors do not need to register to vote.

9. A “Permanent Overseas elector” is a person who is a United States citizen, 18 years old or older, who resided in Wisconsin immediately prior to leaving the United States, who is now living outside the United States and has no present intent to return, who is not registered in any other location, or who is an adult child of a United States citizen who resided in this state prior to establishing residency abroad. Permanent Overseas electors will receive ballots for federal offices only and must be registered to vote prior to receiving a ballot.

10. A “Temporary Overseas elector” is a person who is a United States citizen, 18 years of age or older, a resident of Wisconsin and is overseas for a temporary purpose and intends to return to their Wisconsin residence.

11. A “Military elector” who is currently hospitalized may request absentee voting. Complete the form for a hospitalized elector must provide his/her name, signature and address on this application.

Assistant Signature: If the elector is unable to sign the application, a representative of the elector shall attest to a statement that the application is made on request and by authorization of the named elector, who is unable to sign the application due to physical disability.

Voter Signature: By signing and dating this form, you certify that you are a qualified elector, a U.S. citizen, and has no present intent to return to Wisconsin.

Please note: The absentee ballot application must be signed by the elector, unless the elector is unable to sign due to an incapacitating physical disability.