Office of the Kansas Secretary of State Application for Advance Ballot by Mail DOWNLOAD THIS FORM AT WWW.SOS.KS.GOV

ELK COUNTY P.O. Box 606 HOWARD, KS 67349-0606



1. Affirmation	on						
	an Elector of the Cour KANSAS	,	ELK	and State		100	dvance Voting Ballo
State of		, County o	t_ELK	,	ss: (where appl	ication is comple	eted)
2. Voter Ide	ntification Requirer	ments					
	that my current and ided in order to receive			cense number o	or Kansas nondr	river's identificat	ion card number
Current Kans	sas driver's license n	umber or n	ondriver's id	entification can	d number:		
If I do not how	to a current and ualid	d Kanasa d	labanata Kanasa		2.000 43	1 11 10 11	W 10 50
	ve a current and valid a copy of one of the						
Nondri U.S. p Conce or ano Emplo	's license issued by Kansa iver's ID card issued by K assport saled carry of handgun lice ther state ryee badge or ID documen	ansas or ano	ther state by Kansas	• \$ • F • II	J.S. military ID Student ID card issue educational institution Public assistance ID D card issued by an	n card issued by a go	Kansas postsecondary vernment office
Last Name		First I	Name		M.L.	Date of Birth (MM/DD/	m
	be filled in only when red		mary election be		atic Republican	State	Zip Code
Mailing Address	to man Danot (ii din	erent from		Consider Consider ()			
Note: The ballot	may be mailed only to the	voter's resid	ential or mailing	address as indica	ted on the county vo	State	Zip Code
temporary reside	ntial address, or to a med lacks proficiency in the En	ical care facil	ity where the vo	ter resides. These	restrictions do not a	noty to a voter who	has an illness,
5. Voter Sign	nature Note: False s	tatement on	this affirmation	n is a severity lev	el 9, nonperson fel	ony.	
authorized to	affirm under penalty sign for the above nate an advance voting (date).	amed voter	who has a d	disability prever	nting the voter fro	om signing an a	pplication, I am
Required	Signature of Voter			Date (MM/DD/YY)		Phone Number	
	FOR OFFICE USE ON	VLY Date App.	Rec'd.	Ballot Mailed _	Transmitt	ted by	