APPLICATION FOR ABSENT ELECTOR'S BALLOT

State of Idaho
} s.s.
County of _____

Date: _____, ____

I, _____, hereby make application for an absent elector's ballot or ballots to be voted at the election held on

(Check election this application is to be used)

- ☐ 1st Tuesday in February
- ☐ 4th Tuesday in May / Primary Election
- ☐ 1st Tuesday in August
- ☐ Tuesday following 1st Monday in November / General Election
- ☐ Special Emergency Election to be held on _____, _____.

My home address is: _____ in _____,
(House Number and Street) (City)

and I am duly registered in _____ election precinct, _____ County, Idaho.
(Name and Number)

Please mail ballot(s) to me at the following address:

_____
(Elector)

_____
(Mailing Address)

_____
(City, State and Zip Code)

ELECTOR MUST PERSONALLY SIGN APPLICATION

Signed: _____
(Elector)

EA-4 Approved by the Secretary of State, 2003
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