

Ballot Style_____

Election Judge Initials_____

For Election Officials Only

Voter ID #

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Ballot Code

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Voter's Consecutive
Number

Vote by Mail Ballot Application

General Election, November 8, 2016

Under penalties pursuant to Section 29-10 (perjury) of the Illinois Election Code, I, affirm that all of the statements on this application are true and correct. I am applying for a ballot by mail, which I will mail to the **Iroquois County Clerk's** office before Election Day, unless I vote my ballot at the Iroquois County Clerk's office. **Under state law, ballots must be postmarked on or before Election Day and received no later than 14 days after Election Day in order to be counted.**

1

Please print applicant's name and complete voting address:

Name _____

Address _____

City _____ Zip Code _____

2

Please print name and address where the ballot should be mailed:

Full Name _____

Address _____

City _____

State _____ Zip Code _____

Phone Number _____

3

Sign and Date in box below:

Voter Signature

Dated: _____

To vote by mail, this completed form must be received no later than **Thursday, November 3, 2016** by the Iroquois County Clerk's Office, 1001 E. Grant, Watseka, IL 60970.

For more information about voting by mail, email the County Clerk at iroquoiscountyclerk@co.iroquois.il.us or call 815-432-6960.