

**WASHAKIE COUNTY
REQUEST FOR ABSENTEE BALLOT**

NAME _____

RESIDENCE ADDRESS _____

City State Zip Code

Phone Number _____

BALLOT REQUEST FOR **PRIMARY ELECTION** _____

REP _____ DEM _____ OTHER _____

GENERAL ELECTION _____

SPECIAL ELECTION _____

DATE OF ELECTION _____

BALLOT TO BE **MAILED** TO THE FOLLOWING ADDRESS:

Name _____

Address _____

City State Zip

Signature

Date

**BALLOT REQUESTED BY
(If other than the applicant)**

Name

Relationship

VOTER ID _____

DIST. & PREC. _____

REP _____ DEM _____

OTHER _____

BALLOT MAILED _____

BALLOT

RETURNED _____

BALLOT MAILED _____

BALLOT

RETURNED _____

VOTED IN OFFICE _____