

EARLY VOTING APPLICATION 32-941
STATEWIDE GENERAL ELECTION, TUESDAY, NOVEMBER 6, 2018

Date _____

I, _____ hereby request a ballot.
(Printed name of voter)

My Phelps County Address is: _____

City _____ **Zip** _____

I may be reached at this phone number _____ **to verify any information.**

Date of Birth _____

I will vote in person _____

I will take ballots with me _____

Please mail ballot _____

(Voter print name here)

(Voter sign here)

(Signature of person acting as an agent for a registered voter)

****The penalty for election falsification is imprisonment for up to five years, or a fine not to exceed \$10,000.00 or both****

If ballots are mailed to an address other than voter's permanent address, please fill out the following.

Address: _____

City/Zip: _____

Submit this request to: Phelps County Clerk

Sally Fox
PO Box 404
Holdrege, NE 68949

Office use only:

Registered voter _____

Precinct _____

Ballot Style _____

Tracking # _____

Line # _____