

Social Security No. (optional)

Drivers License No.

COBB COUNTY BOARD OF ELECTIONS & REGISTRATION

APPLICATION FOR OFFICIAL ABSENTEE BALLOT BY MAIL 2011

PLEASE PRINT (FAILURE TO FILL OUT THE FORM COMPLETELY COULD DELAY YOUR APPLICATION)

Form with fields: DATE OF BIRTH, PHONE #, E-MAIL ADDRESS, NAME AS REGISTERED (LAST, FIRST, MIDDLE), CURRENT ADDRESS (#, STREET, CITY, ZIP CODE)

Mail the ballot to my temporary out-of-county address: (or alternate address for physically disabled voter).

Form with fields: # STREET, CITY, STATE, ZIP CODE

I HEREBY APPLY FOR AN ABSENTEE BALLOT FOR THE FOLLOWING ELECTION:

Note: one (1) application per election may be filed up to 180 days prior to the Election Date

- Special Election, September 20, 2011, Georgia House District 43 Only
Special Election Runoff, October 18, 2011, Georgia House District 43 Only
General Municipal Election, November 8, 2011, City of Kennesaw
General Municipal Election, November 8, 2011, City of Powder Springs
General Municipal Election, November 8, 2011, City of Smyrna
Municipal Runoff, December 6, 2011, City of Powder Springs
Municipal Runoff, December 6, 2011, City of Smyrna
Other



SIGNATURE OR MARK* OF VOTER - REQUIRED

*Signature of person preparing application if voter is disabled or illiterate - REQUIRED

You may apply on behalf of another person in the following circumstances: In the case of a voter residing temporarily out of the county or a physically disabled voter residing within the county, application may be made by mother, father, grandparent, brother, sister, aunt, uncle, spouse, son, daughter, niece, nephew, grandchild, son-in-law, daughter-in-law, mother-in-law, father-in-law, brother-in-law or sister-in-law of the age of 18 or over upon completing the following oath: I, the undersigned do swear (or affirm) that the above-named voter is residing temporarily out of the county or is a physically disabled voter residing within the county and that the facts included in this application are true.



SIGNATURE AND RELATIONSHIP OF RELATIVE REQUESTING BALLOT - REQUIRED

OFFICE USE ONLY

DIST. COMBO, PRECINCT, BALLOT #, ISS. DATE

I HEREBY CERTIFY THAT THE ABOVE NAMED VOTER IS ELIGIBLE / IS NOT ELIGIBLE TO RECEIVE AN ABSENTEE BALLOT REASON FOR REJECTION: INITIALS

PACKET PREPARED BY: PACKET REVIEWED BY:

Please Fax: 770/528-2458 or 770/528-2519 or Email: info@cobbelections.org

or Mail: COBB COUNTY BOARD OF ELECTIONS & REGISTRATION P.O. BOX 649 MARIETTA, GA 30061-0649