Application: Absentee Voting By Mail

		Application No
1. First:	Last:	MI:
2. Address Where You Live:		
City:	State:	Zip Code:
Phone:	Check this box if the address above differs from	n the address on your voter registration card.
3. Mail my Absentee Ballot to th	is address:	
4. Date of Birth:	(mm/dd/yyyy) 5. Social Security Nu	ımber:
6. I wish to vote in the: Ger	neral Election	eate \square Republican or \square Democratic) \square Other
7. Reasons for Voting Absentee:	(CHECK ONE)	
the polls are open.		ting period and on Election Day during all hours
student), but the school is o	outside of the Tennessee county where I am register	a full-time student (or I am the spouse of a full-time red.
☐ I am on the permanent absorption☐ I am hospitalized, ill, or photor this election.	entee voting register. Pysically disabled and because of such condition, I	am unable to appear at my polling place
☐ I am a caretaker of a hospir	talized, ill or disabled person.	
	ty whose polling place is inaccessible.	
☐ I will be serving on jury du		
☐ I am sixty (60) years of ago	e or older. in the election for which I am applying to vote abs	ventee by mail
	tion official or a member or employee of the election	•
•	early voting period or on Election Day because I wil	•
	ers License (CDL) or I am a spouse of a person wind have no specific out-of-county or out-of-state ac	ith a CDL and will be out of the county during early ddress to receive mail during this time.
☐ Enclosed is a copy	of the CDL and the CDL number is:	
Day and have no specific of	out-of-county or out-of-state address to receive mai	be out of the county during early voting and Electional during this time.
☐ Enclosed is a copy		
	litary, spouse or dependent, \square an activated National vote in Tennessee (must include mailing address or	Guard member on state orders, \square or overseas citizentside county even if ballot is emailed).
Ballot to be sent:	By Mail 🔲 Electronically, e-mail address:	
_	o applies to vote absentee by mail who is not as than two (2) years nor more than twelve (•
(have) changed my address since election; and I desire to vote by polling place on Election Day.	the last election in which I voted; I am a register mail. I also declare that I have not previously vot	clare that I reside at the above address; I (have not) ared voter of the county; I am eligible to vote in the ded in this election, nor will I attempt to vote at my
I, the undersigned, under t true and correct to the bes	the penalty of perjury, do swear or affirm that to the standard of my knowledge.	the information contained in this document is
Signature of Voter (Digital Si	gnature Not Accepted):	Date:
Assistance Signature: (Requi	red if voter cannot sign or make a mark.)	
Signature of Person Assisting	: Address:	Date:
Signature of Witness:	Address:	Date:
BELOW	INFORMATION FOR ELECTION COM	MISSION USE ONLY!
The signatures above have be	en compared with the permanent registration r	records and (ARE) (ARE NOT) the same.
☐ Application accepted and s	supplies furnished on	
☐ Application rejected becau	ise	Date:
	;;	
Administrator or Deputy's Sig		AGRICULTURE E

Return to: Grainger Co. Election Commission P.O. Box 28 Rutledge, TN 37861