

Nebraska Early Voting Ballot Application

Date:

RETURN COMPLETED APPLICATION TO: Polk County Election Office 400 Hawkeye St., PO Box 267 Osceola, NE 68651

EMAIL: clerk@polk.nacone.org FAX: (402) 747-2656

Applications must be physically signed. You can take a picture or scan your request and email it to your county election official. You can also mail or fax your application to your county election office.

I, the undersigned, declare th	at I am a registered voter in Nebrask	a. I am registered at the following	address:		
		,	in	County.	
I am requesting early voting be to be held on		eneral Special (Other)	—	ction)	
I request to	vote in the Election Office today as	he Early Voting Polling Place.			
_	nat ballots be mailed to me, (or to the		_		
Address Liv	ne 2:				
City, State,	Zip:				
I request to	take the ballots with me, (or to the p	oerson I am acting as agent for, up	o to two people).		
To confirm	any information prior to sending the	ballots, the Election Office may re	each me at:		
	E _i				
Voter's Printed Name:		_ Voter's Signature:			
Voter's Date of Birth (MM	1/DD/YYYY)//				
If applying for another voter: Agent's Signature:			Relationship:		
	enalty for election falsification is im elve months post-release supervisio		=		
	Election Office Use Onl	y			
	Application Number:				
	Voter ID Number:	Ballot Assigned:	Staff initials:		

*§*32-941 Updated June 2020