

Nebraska Early Voting Ballot Application

Date:

RETURN COMPLETED APPLICATION TO: Seward County Election Office 529 Seward St., PO Box 190 Seward, NE 68434

EMAIL: sschweitzer@co.seward.ne.us FAX: (402) 643-2228

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 that I					
				, in	County.
I am requesting early voting ball	ots for the following Elec	_		ballot is 120 days before an e	lection)
to be held on	, 20				
I request to vo	te in the Election Office	today as the Early V	oting Polling Place.		
-	coallots be mailed to me,	-		, at the following address	5:
	2:				
City, State, Zip	:				
I request to tal	ke the ballots with me, (c	or to the person I ar	n acting as agent for, u	p to two people).	
To confirm any	information prior to se	nding the ballots, th	ne Election Office may re	each me at:	
Phone:		Email:			
Voter's Printed Name:		Voter	's Signature:		
Voter's Date of Birth (MM/I	DD/YYYY)/	_/			
If applying for another voter: Age		Rela	Relationship:		
	alty for election falsifica e months post-release s				
	Election Office	: Use Only			
		ber:	Date Received:	Date Sent:	
	Voter ID Numbe	r:	Ballot Assigned:	Staff initials:	

*§*32-941 Updated June 2020