

Nebraska Early Voting Ballot Application

Date:	

RETURN COMPLETED APPLICATION TO: York County Election Office 510 Lincoln Ave. York, NE 68467

EMAIL: clerk@york.nacone.org FAX: (402) 362-7558

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 am a registered voter in Nebraska. I ar	m registered at the following a	address:		
		, i	in	County.	
I am requesting ea	arly voting ballots for the following Election: General (Note: The fi	Special (Other)	-	ection)	
to be held on	, 20				
	I request to vote in the Election Office today as the Ea	rly Voting Polling Place.			
	I request that ballots be mailed to me, (or to the perso		_	:	
	Address Line 2:				
	City, State, Zip:				
	I request to take the ballots with me, (or to the person				
·	Го confirm any information prior to sending the ballot	ts, the Election Office may rea	ach me at:		
Phone: _	Email: _				
Voter's Printed	Name: Vo	oter's Signature:			
Voter's Date of	Birth (MM/DD/YYYY)//	_			
If applying for anoti	her voter: Agent's Signature:	Relati	Relationship:		
	The penalty for election falsification is imprison and twelve months post-release supervision, a f		=		
	Election Office Use Only Application Number:	Date Received:	Date Sent:		
	Voter ID Number:				

*§*32-941 Updated June 2020