

TO REQUEST AN ABSENTEE BALLOT BY MAIL, complete this letter and mail, fax or hand deliver to your registrar of voters during the period to request a mail ballot.

(Insert Date)

Dear Parish Registrar of Voters,

1. I am or expect to be temporarily outside the territorial limits of the State of Louisiana or absent from the Parish of _____, during the early voting period and on election day.

2. My residential address in _____ Parish is _____
(not a Post Office Box)

3. Please send a ballot for the following elections: (see *Election Information* pages for elections in your parish)

Primary Election on _____ General Election on _____

(I declare that I will be eligible to vote absentee by mail in the general election.)

4. Name: _____
Last Middle First

5. My Date of Birth is: _____ 6. My Mother's Maiden Name is _____

7. Ward/District/Precinct (if known) _____

8. *Social Security Number _____ - _____ - _____ or last four digits _____

*Louisiana Driver's License Number _____

* Daytime telephone Number _____

* **Optional**

If you registered to vote by mail and have not voted in person special rules apply. Please contact the Secretary of State at 1-800-883-2805 for more information.

9. Please send my absentee ballot to: _____

(If this address is within the parish where I am registered to vote, I understand that I must state that I will be outside the territorial limits of the state or parish from _____ through _____)

Sincerely, 10. _____
(Signature)

_____(witness)/_____(witness)

(Signature of two witnesses only required if signed by mark)

INSTRUCTIONS (NOTE: YOU MAY COPY THIS FORM FOR OTHER LOUISIANA DISPLACED REGISTERED VOTERS)

1. Fill in your parish of registration.
2. Identify your residential street address in your parish of registration.
3. Insert the date of the Primary and General Elections in your parish. If you will be eligible to vote absentee in the General Election please check the box to indicate that you will be absent from the parish on that date.
4. Insert your name.
5. Insert your date of birth.
6. Insert your mother's maiden name.
7. If you know your Ward, District or Precinct please include them in this request.
8. This information is optional but it helps identify your information on the voter registration rolls in your parish.
9. Please list the complete address where you would like for your ballot to be mailed. If this address is within your parish of registration, please provide the dates that you will be outside the territorial limits of the state or parish.
10. Please sign the document. If you cannot affix your signature and must sign by mark, please provide the signature of two witnesses.
11. Mail, fax or hand deliver this letter to the Registrar of Voters in your Parish (*See page 1 for the address in your Parish or call for fax information*). Only an immediate family member can hand deliver this request on your behalf.

For Office Use Only: Reg # _____ W/D/P _____ Party _____ Date Rec'd _____