



ABSENTEE/MAIL VOTER'S BALLOT APPLICATION
 SECRETARY OF STATE
 SFN 51468 (06-10)

For reference, see North Dakota Century Code, Chapter 16.1-07

Application must be for at least one of the following elections: (check all that apply)

- State Primary Election Special Election
 City Election School Election **OR** All Statewide Elections within the Year
 State General Election

Residential Address:

Voter Name:		Driver's License Number:		Date of Birth:	
Residential Address of Voter:		City:	County:	State:	Zip Code:
Check ONE : (if applicable) <input type="checkbox"/> Uniformed service or family member living away from the voter's residence (but within the United States) <input type="checkbox"/> Uniformed service or family member living away from the voter's residence (but outside the United States) <input type="checkbox"/> a citizen living outside of the United States				Fax Number: (if applicable)	
				E-mail Address: (if applicable)	

Ballot Delivery Address (if different than your voting address above):

Ballot Delivery Address of Voter:	City:	County:	State:	Zip Code:
	Home or Daytime Telephone Number:			

I do solemnly affirm that I have resided in the precinct, where my residential voting address is located, for at least thirty days next preceding the election.

 Signature of Applicant

 Date

If the applicant is unable to sign the applicant's name, the applicant shall mark (X) or use the applicant's signature stamp on the application in the presence of a disinterested individual. The disinterested individual shall print the name of the individual marking the X or using the signature stamp below the X or signature stamp and shall sign the disinterested individual's own name following the printed name together with the notation "witness to the mark".



Mark

 Printed name of person making mark

 Signature of "witness to the mark"

MAIL OR SUBMIT TO THE AUDITOR OF YOUR COUNTY OF RESIDENCE OR APPROPRIATE ELECTION OFFICIAL