

2022 Minnesota Absentee Ballot Application

Complete lines 1 through 7 below. Please print clearly.

Return this application as soon as possible. Ballots must be returned by election day to be counted.

Important: Active duty military and overseas voters should not use this application. See the other side for more information.

1.	absentee ballots requested for the following election(s) <i>(if no election is marked, a ballot will be mailed for the next election only)</i>			
	2/8 Special Election 3/8 Township Election	4/12 Special Election 5/10 Special Election	8/09 Primary Election 11/8 General Election	Both 8/9 & 11/8 Elections Other (specify date):

2.	last name or surname	first name	middle name	suffix
-----------	----------------------	------------	-------------	--------

3.	date of birth (mm/dd/yyyy)	county where you live	phone number
-----------	----------------------------	-----------------------	--------------

3.	email address
-----------	---------------

4.	<p>mark all boxes that apply:</p> <p><input type="checkbox"/> I have a MN-issued driver's license or MN ID card. The number is: _____</p> <p><input type="checkbox"/> I have a social security number. The last four digits are: XXX-XX-_____</p> <p><input type="checkbox"/> I do not have a MN-issued driver's license, MN-issued ID card or a social security number.</p> <p>Your identification number will be compared to the one on your absentee ballot envelope.</p>
-----------	---

5.	address where you live (residence)	apt.	city	MN	zip code
-----------	------------------------------------	------	------	-----------	----------

6.	address where your absentee ballot should be sent	apt.	city	state	zip code
-----------	---	------	------	-------	----------

7.	<p>I certify that I:</p> <ul style="list-style-type: none"> • am completing this application on my own behalf; • will be at least 18 years old on election day; • am a citizen of the United States; • will have resided in Minnesota for 20 days immediately preceding election day; • maintain residence at the address given on this application form; • am not under court-ordered guardianship in which the court order revokes my right to vote; • have not been found by a court to be legally incompetent to vote; • have the right to vote because, if I have been convicted of a felony, my felony sentence has expired (been completed) or I have been discharged from my sentence; and • have read and understand this statement: The above information is accurate, and I sign this application form under penalty of perjury, a felony punishable by not more than 5 years imprisonment, a fine of not more than \$10,000, or both. <p>sign here: X _____ date ____/____/____</p>
-----------	---

See other side for special instructions for voters with disabilities or power of attorney.

official use only

Primary → <input type="checkbox"/> reg <input type="checkbox"/> non-reg	received date	ballot issued date	initials	type M C HCF	reason replaced <input type="checkbox"/> rejected <input type="checkbox"/> lost <input type="checkbox"/> spoiled <input type="checkbox"/> never received	repl. date:	precinct
General → <input type="checkbox"/> reg <input type="checkbox"/> non-reg	received date	ballot issued date	initials	type M C HCF	reason replaced <input type="checkbox"/> rejected <input type="checkbox"/> lost <input type="checkbox"/> spoiled <input type="checkbox"/> never received	repl. date:	school district

