Virginia Absentee Ballot Application Form

Print your Personal Information — 1

Last Name: _____ First Name: _____

Middle Name: _____ Suffix (sr., jr., etc.): _____

Birth Year (optional): Y Y Y Y Social Security # (last 4 digits required): # # # - # # - # # # #

Permanent Absentee Option — 2

Do you want to vote by mail for ***ALL future elections***? ☐ Yes (do not complete #3) ☐ No (skip to #3) If yes, which party primary ballots would you like to receive? *If none selected, we won't send primary ballots.*

☐ Democratic Party ☐ Republican Party ☐ I do not wish to receive ballots for Primary Elections.

Absentee Ballot for One Election — 3

I want to vote an absentee ballot in the: ☐ General or Special Election ☐ Democratic Primary OR ☐ Republican Primary

Date of Election: MM / DD / YYYY in the city/county of: _____

Address Where You Live — 4

Address: _____ Apt/Suite #: _____

City: _____ **VA** Zip Code: # # # # # #

If rural address or homeless, describe residence.

Ballot Mailing Address if different from above — 5

If you chose the Permanent Absentee Option in Section 2 above, do not fill out this section.

Address: _____ Apt/Suite #: _____

City: 6 State: _____ Zip Code: # # # # # Country: _____

Contact info (Optional) — 6

Telephone: # # # - # # # - # # # # not required but helpful

Email/Fax: _____

Section 7 only applies to some voters. Leave blank and skip to Section 8 if none of these apply to you.

Change of Name/ Address — 7a

Former Full Name: _____

Former Address: _____ Date Moved: MM / DD / YYYY

City: _____ State: _____ Zip code: # # # # #

Military or Overseas Voters — 7b

If you are a military/overseas voter OR a spouse/dependent, we need to know more:

1. Turn the form over to find your category under the Military and Overseas Section.
2. Print category letter code here: _____. If applicable, last date of residency: _____.
3. Deliver my ballot to: ☐ Residence address from Section 4 ☐ Email address from Section 6 ☐ Ballot mailing address from Section 5 ☐ Fax number from Section 6

Assistance with Ballot — 7c

☐ I need assistance completing my ballot due to a disability, blindness, or an inability to read or write. *If checked, an assistance form will be sent with the ballot.*

☐ I am a print-disabled voter and would like to receive my ballot electronically at the email address provided above in Section 6. *You will Receive your ballot electronically and your general registrar will send you the proper envelopes to return your ballot.*

Assistance with this Form — 7d

Assistant, fill in your information below and sign if applicant is unable to sign due to disability:

Assistant's Full Name: _____ Phone: _____

Assistant's Address: _____ Apt/Suite: _____

City: _____ State: _____ Zip code: # # # # #

I swear/affirm, subject to felony penalties for making false statements pursuant to VA Code § 24.2-1016, that (1) the information provided in this form is true, and (2) I have written "Applicant unable to sign" on the applicant's signature line in Section 8.

Assistant, sign here: _____ Date: _____

Voter's Statement + Signature — 8

I swear/affirm, subject to felony penalties for making false statements pursuant to VA Code § 24.2-1016, that (1) the information provided in this form is true, (2) I am not requesting a ballot or voting in any other jurisdictions in the US, and (3) I am registered to vote in the city/county where I am applying to vote.

Voter, sign here (or mark if unable): X _____ Date: MM / DD / YYYY

Office use only

Precinct: _____ District/Senate/House: _____ Application # _____ App accepted: ☐ Yes ☐ No

Date received: _____ Received by: _____ Reason not accepted

Method received: ☐ Email ☐ Fax ☐ Mail ☐ In person ☐ Other

Ballot sent by: ☐ Email ☐ Fax ☐ Mail

Virginia Absentee Ballot Application Form

Privacy Act Notice: This form requires personal information. The last four (4) digits of your Social Security Number are required. Your application will be denied if you fail to provide the last four digits of your Social Security Number or if you fail to provide any other information required to determine your qualification to vote by mail. Federal law (the Privacy Act of 1974; the Help America Vote Act of 2002) and state law (Virginia Constitution, article II, § 2; § 24.2- 701, Code of Virginia; the Government Data Collection and Dissemination Practices Act) authorize collecting this information and restrict its use to official purposes only.

Warning: Intentionally voting more than once in an election or making a materially false statement on this form constitutes the crime of election fraud. Intentionally voting more than once in an election is punishable under Virginia law as a Class 6 felony and is punishable by a term of imprisonment of up to five years, or confinement in jail for not more than 12 months, and/or a fine of not more than $2,500. Making a materially false statement on this form is punishable under Virginia law as a Class 5 felony and is punishable by a term of imprisonment of up to ten years, confinement in jail for not more than 12 months, and/or a fine of not more than $2,500.

Instructions

How to Apply to Vote an Absentee Ballot

To vote an absentee ballot, complete this form and **submit it to your local voter registration office.** You can find the contact information for your local voter registration office through the Department of Elections' website, https://vote.elections.virginia.gov/VoterInformation/PublicContactLookup.

If you prefer to vote in person, this form is not needed.

General Information

You can apply to vote absentee for all elections (Section 2) or for just one election (Section 3).

If you choose to vote absentee in one election, a separate form is required for each election. To apply to vote absentee in all future elections, please see the instructions for "Permanent Absentee Option (Section 2)."

Your local office must receive your application by mail, email, or fax by **5:00 pm on the eleventh (11th) day before the election**.

Ballots are available 45 days before an election. *(If you register to vote in person, you must wait five days before you can have your ballot mailed to you.)*

Your Personal Information (Section 1)

Provide your personal information. Your name and the last four digits of your Social Security number are required.

Permanent Absentee Option (Section 2)

If you checked the "Yes" box in Section 2, you are indicating that you wish to receive your ballot in the mail for every election in the future.

Ballots for all future elections will be sent to the address in your voter registration record. If you need your ballot sent to a different address or want to change the political party you've chosen for Primary Elections, please use form SBE-703.1C.

If you move to a new county or city, complete a new form and submit it to your new general registrar to continue receiving ballots.

If you want to receive a primary ballot, you must indicate a political party preference in Section 2. If you do not want a ballot for primary elections, please mark the last box or leave the answer to this question blank.

Absentee Ballot for One Election (Section 3)

Fill out Section 3 if you only want to receive an absentee ballot for one election. In the spaces provided, indicate for which election you would like to receive an absentee ballot (General Election, Special Election, Democratic Primary, or Republican Primary). Make sure to add the date of the election and include the county or city in which you live. By filling out Section 3, you will receive an absentee ballot only for the election you have indicated.

Address Where You Live (Section 4)

Provide the address where you live. If you have a rural address or are homeless, please describe where you live.

Ballot Mailing Address (Section 5)

Only fill out this section if

- you want to vote absentee in one election and have filled out Section 3; and
- you want your ballot mailed to a different address than the one in your voter registration record.

Your ballot can only be mailed to one of the following:

1. Your residence address
2. Your location while outside your city/county of residence
3. Your place of temporary confinement for illness, disability, misdemeanor conviction, or awaiting trial

Ballots cannot be forwarded or sent "in care of"/"to the attention of" another person.

Military and Overseas Voters (Section 7b)

The Uniformed and Overseas Citizen Absentee Voting Act (UOCAVA) entitles certain individuals to receive their vote by mail ballots by email or fax. If you meet one or more of the following UOCAVA voter categories, please enter the code(s) for that category in section **7b** of this form.

A. I am an active duty merchant marine or in the armed forces.

B. I am a spouse or dependent living with an active duty merchant marine or armed forces member.

C. I am temporarily residing outside of the U.S. for a non-employment related reason. (Voter Registration Office: review VA Code § 24.2-453)

If you have given up your address permanently or have no intent to return, enter your last date of residency in section 7b, line 2.

D. I am temporarily residing outside of the U.S. for employment or a spouse or dependent living with a person temporarily residing outside of the U.S. for employment.

While UOCAVA voters may use this form, they are encouraged to use the **Federal Post Card Application (FPCA)** (which also serves as a voter registration application/update). If you do submit this Virginia Vote by Mail form (ELECT-701), it will be interpreted as a request by you to discontinue any FPCA you have previously submitted. For more information on or to obtain the FPCA, visit https://www.fvap.gov/.

If your ballot is being **emailed** to you, ensure you monitor your junk/spam email folders. If your ballot is being **faxed** to you, ensure you monitor your fax machine. The Department of Elections and your local voter registration office are **not** responsible for emailed or faxed ballots that are routed to a junk/spam folder or are not received by you.

Voter's Statement and Signature (Section 8)

In order for the application to be valid, you must sign the application or, if you are disabled and unable to sign, the person assisting you with filling out your application should write "Voter unable to sign" on the line and fill out Section 7d.