City of St. Francis

ABSENTEE BALLOT REQUEST

I certify that I am registered to vote, a United States citizen, age 18 or older, and that I have resided at the following address, which is my legal voting address, for at least 28 consecutive days before the election for which I am applying for an absentee ballot. You must provide a copy of your photo ID at time of request.

◯ February 16, 2016

◯ April 5, 2016

◯ August 9, 2016

◯ November 8, 2016

◯ Calendar Year 2016

Name (please print) _____

Residence Address _____

_____

Date of Birth _____/_____/_____ Telephone No. _____

Mailing Address (if different than Residence) – Send Ballot to:

_____

_____

Signature of Elector _____ Date: _____

Aldermanic District _____

3400 E. Howard Avenue ● St. Francis, WI 53235 ● (414) 481-2300 ● Fax: (414) 481-6483