Summit County Board of Elections
Absentee Application
470 Grant Street
Akron, Ohio 44311-1157
Phone: (330) 643-5200

FOR OFFICE USE ONLY
CNTY ID#:_____
APP. NO._____
CITY/VILL.TWP_____
WARD_____PCT_____
BALLOT #_____
CRT_____ ***LABEL***_____

PLEASE PRINT OR TYPE

Voter's Name_____

Home Address_____

City, Village, or Post Office_____

County_____**Zip Code**_____

Send Ballot to: (If different from home address)
Name_____

Care of/ PO Box_____

Address_____

City_____State_____Zip Code_____

You must provide your birthdate:_____/_____/_____**and one of the following:**
month day year

☐ Your Ohio driver's license number_____, **or**

This number contains 2 letters and 6 numbers. (Ex. AB123456)

☐ The last four digits of your social security number_____, **or**

☐ Copy of a current and valid photo identification, a current utility bill, bank statement, government check, paycheck or other government document that shows your name and address.

I wish to vote in the following election to be held on_____**.**
Check one: (Date of Election)

1. Primary Election
   - ☐ Democratic
   - ☐ Republican
   - ☐ Nonpartisan or issues only
2. ☐ General Election
3. ☐ Special Election

I hereby declare, under penalty of election falsification, I am a qualified voter and the statements above are true to the best of my knowledge and belief. I understand that if I do not provide the requested information, my application cannot be processed.

X_____ _____
SIGNATURE OF VOTER **Date Signed**

Voluntary: To assist the board of elections in contacting you in a timely manner if your application is incomplete:

Telephone Number: _____ E-mail Address:_____

WHOEVER COMMITS ELECTION FALISFICATION IS GUILTY OF A FELONY OF THE FIFTH DEGREE

INSTRUCTIONS
Chapter 3509 of the Revised Code of Ohio

1. Use of this form is optional. To be valid, an application must include the voter's name, voting address, date of birth, and signature; the election for which the ballot is requested and, if a partisan primary election, the voter's political party affiliation; and one of the following: voter's Ohio driver license number, the last four digits of the voter's social security number, or a copy of the voter's current and valid photo identification or a copy of a current utility bill, bank statement, government check, paycheck or other government document that shows the voter's name and address.
2. An application by mail must be received by your county board of elections by noon on the third day before the election. Applications by the voter in person must be received by the close of regular board office hours the day before the election. Applications for persons who are hospitalized due to a medical emergency will be accepted until 3 p.m. on election day.
3. Your completed ballot must be delivered to your county board of elections office in person by you or a near relative, or by mail not later than the close of the polls on election day. *Exception:* If the voter is outside of the United States on election day, the ballot envelope must be signed or postmarked prior to the close of polls and received by the board no later than 10 days after the election or 20 days after the presidential primary election.