

# North Carolina Absentee Ballot Request Form for 2022

### Request an absentee ballot

You can request an absentee ballot for 1 voter per form, for 1 election at a time.

The information that you provide on this form will be used to update your current voter record if signed by the voter. You may not change your party affiliation using this form.

If you are not registered, you must submit a voter registration form with this request.

## Instructions

#### 1: Election

USE A SEPARATE FORM FOR EACH ELECTION YOU ARE REQUESTING. See ncsbe.gov for types of elections and election dates in 2022. *Special note for primary elections:* If you are not affiliated with a political party (unaffiliated) and you are requesting a ballot for a primary election, select the primary in which you would like to vote or select a nonpartisan ballot. A nonpartisan ballot will not have partisan primary contests. Voters registered with a party are only eligible to vote in their party's primary.

#### 2: Voter name

Provide your full legal name. If your name has changed, this form will be used to update your current voter record.

#### **3: Voter identification**

You must provide your date of birth **and** one of the following:

- A NC Driver's License or DMV ID card number
- The last 4 digits of your social security number

#### 4: Home address

Provide the street address where you CURRENTLY live. If you are temporarily living away or displaced and you plan to return later, you have not lost your place of residence. **However**, if you have abandoned your place of residence and intend to stay at a new address indefinitely, you must provide that address here. Signing in section 11 will update your voter registration. If your new address is in a different county, you will not be able to update your address using this form and will need to submit a new voter registration to your new county.

#### 5: Ballot mailing address

Indicate where you would like your ballot to be sent. If you do not want your ballot to be sent to your residential or mailing address, provide another address here.

#### How to return this form

Return your completed and signed form to your county board of elections by **5:00 pm on the Tuesday before the election.** 

You can:

- Drop it off in-person
- Mail it

#### This form can only be returned by:

- The voter
- The voter's near relative or verifiable legal guardian
- A Multipartisan Assistance Team

### 6: Accessibility options

Check the first box if you require an absentee ballot for other possible elections in 2022 due to your continued or expected illness or disability.

Check the 2nd box in section 6 ONLY if you require an accessible ballot due to blindness or visual impairment *and* provide your email in section 7 so that we may contact you when the ballot is available.

### 7: Contact information

This section asks for your contact information, in case we have questions about your request. Provide the contact information for the voter or near relative or legal guardian.

#### 8: Requesting for a near relative

A near relative or legal guardian may request a ballot for a voter. A near relative is a voter's:

- Spouse
- Brother or sister
- Parent or stepparent
- Mother/father-in-law
- Child or stepchild
- Son/daughter-in-law
  Grandparent/Grandchild
- Grandparent/Grandchild

If you are a near relative or legal guardian who is requesting a ballot on behalf of a voter, you:

- must sign in the box in this section
- may **not** make changes to the voter's registration record

#### 9: Assisting a voter

If you are assisting a voter, complete this section.

Any voter may receive assistance from their near relative or verifiable legal guardian.

A voter who is blind, disabled, or unable to read or write may receive assistance from somebody else if no near relative or legal guardian is available.

If the voter is a patient in a hospital, clinic, nursing home, or adult care home ("facility") in North Carolina, a member of a

("facility") in North Carolina, a member of a Multipartisan Assistance Team (MAT) can also assist the voter. Contact the

### Return this form to:

Absentee Dept, Guilford County Elections PO Box 3427

Greensboro, NC 27402-3427

Questions? Call (336) 641-6876 or 6874 or visit www.guilfordelections.org

#### **Request online**

Complete, sign, and submit your request online at **votebymail.ncsbe.gov**.

county board of elections to request a MAT. If a near relative or legal guardian is not available and a MAT is not available within 7 calendar days of a request, the voter may get assistance from anyone who is **not**:

- An owner, manager, director, or employee of the "facility"
- An elected official, a candidate, or an officeholder in a political party
- A campaign manager or treasurer for a candidate or political party

#### 10: Military or overseas

Complete this section if you claim North Carolina as your voting residence and are:

• A U.S. citizen currently outside of the United States

**Or** a member of one of the following, **or** a spouse or dependent of a member of one of the following:

- The active or reserve components of the Army, Navy, Air Force, Marine Corps, or Coast Guard of the United States who is on active duty
- A member of the Merchant Marines, the Commissioned Corps of the Public Health Service, or the Commissioned Corps of the National Oceanic and Atmospheric Administration of the United States
- A member of the National Guard or State militia unit who is on activated status

#### 11: Voter's signature

This form must be signed **by the voter** (unless a near relative or legal guardian is requesting a ballot on the voter's behalf and fills out section 8). If the voter cannot physically sign this form, they can make a mark. **A typed signature or signature fonts are not allowed.** 

If you indicate that you have changed your name (section 2) or address (section 4), signing in this section will update your voter registration.

Fraudulently or falsely completing this form is a Class I felony under Chapter 163 of the NC General Statutes.

# North Carolina Absentee Ballot Request Form for 2022

**Required sections are in red** 

Absentee Dept, Guilford County Elections PO Box 3427 Greensboro, NC 27402-3427

absentee@guilfordcountync.gov (Questions Only) (p) 336-641-6876 or 6874

| Select 1 election<br>You can request 1 ballot for<br>only 1 election at a time.<br>Required   | 1  | 05/17/2022 Primary Election<br>07/05/2022 or 07/26/2022<br>(2nd Primary/Runoff)<br>11/08/2022 General Election   | primary in which to participate or select a nonpartisan ballot. A<br>nonpartisan ballot will not have candidates who are running<br>affiliated with a party. This will not change your unaffiliated status. |                                   |                     | Democratic<br>Libertarian<br>Republican<br>Nonpartisan |
|---|----|--|---|-----------------------------------|---------------------|--|
| Print voter name  |    | Last name Suffix (Jr, Sr., III, IV, <i>if applicable</i> )   |   |                                   |                     |  |
| The name you give on this form will be used to update your registration.  | 2  | First name Middle name   |   |                                   |                     |  |
| Required  |    | Former name (if your name has changed)   |   |                                   |                     |  |
| Voter identification  |    | Date of birth (mm/dd/yyyy)     NC Driver's License/DMV ID number   |   |                                   |                     |  |
| Required  | 3  |  | AND OR  | f your Social Security            |                     |  |
| Home address  |    | Street   |   |                                   | Unit #_             |  |
| Provide your residential  |    | City   | NC Zip  | C                                 | ounty               |  |
| address (where you live) and<br>your mailing address (if<br>different).<br><b>Required</b>  | 4  | Have you moved in the last 30 days? Yes No If yes, date moved? ( <i>mm/dd/yyyy</i> )<br>If you receive mail at a different address or at a Post Office box, provide your full mailing address  |   |                                   |                     |  |
|   |    | Street   |   |                                   |                     |  |
|   |    | City   |   | State                             | Zip                 |  |
| Where should we<br>send your ballot?<br>Check 1.<br>Required  | 5  | Your home address in section 4       Your mailing address in section 4         The address below:  |   |                                   |                     |  |
|   |    | City   |   |                                   | Unit # _<br>Zip     |  |
| -   | _  |  |   |                                   |                     |  |
| Accessible voting options   | 6  | I request absentee ballots for all elections this year due to continued or expected <u>illness or disability</u> .<br>I require an accessible absentee ballot due to <u>visual impairment</u> . ( <i>Provide your email address in section 7</i> ) |   |                                   |                     |  |
| Contact information<br>If we have a question.   | 7  | Phone  | Email   |                                   |                     |  |
| Request for ballot by<br>voter's near relative<br>or legal guardian<br>The requester must complete<br>and sign this section. See the<br>instructions for a list of who can<br>request a ballot for a voter. | 8  | Near Relative or<br>Legal Guardian name Relationship to voter  |   |                                   |                     |  |
|   |    |  |   |                                   | Unit # _            |  |
|   |    | City   |   | State                             | Zip                 |  |
|   |    | Relative/legal guardian, sign an   | d date here (if applicable)   |                                   |                     |  |
|   |    | x  |   |                                   | Date (mm/dd/yyyy    | )  |
| Assisting a voter?<br>If yes, the assistant must<br>complete this section. The<br>voter must sign or make their<br>mark in section 11.  |    | Assistant's full name If the voter is in an eligible care f  |   |                                   | acility and         |  |
|   | 9  | Assistant's full address needs assistance in v<br>ballot, enter the facili   |   |                                   |                     |  |
|   |    |  |   | Facility Name                     |                     |  |
| Military or overseas<br>voter only?<br>See instructions   | 10 | Member of the Uniformed Services or Merchant<br>Marines on active duty or eligible spouse/dependent  |   | I want my ballot delivered to my: |                     |  |
|   |    | U.S. citizen outside the U.S. (Ove   |   | Email                             |                     |  |
|   |    | Overseas <u>full</u> address   |   | Fax                               |                     |  |
|   |    |  |   |                                   | icated in section 5 |  |
|   |    | Overseas address provided in this section  |   |                                   |                     |  |
| Voter's signature<br>Use a pen.   |    | Voter, sign and date here (Required unless ballot requested by a near relative or legal guardian)  |   |                                   |                     |  |
| No electronic signatures<br>allowed.  |    | x  |   |                                   | Date (mm/dd/yyyy    | )  |
| Required  |    | Return form to the County Board of Elections by 5:00 pm on the <u>Tuesday before</u> the election.<br>Do not email or fax.   |   |                                   |                     |  |