

**APPLICATION BY RELATIVE\*  
FOR UNIFORMED SERVICES ABSENT VOTER'S BALLOT**

(On behalf of uniformed services absent voter) R.C. 3511.02(C)

I, \_\_\_\_\_, residing at \_\_\_\_\_  
(Printed name of relative\*) (Street and number, or rural route number)

\_\_\_\_\_, hereby apply to have a Uniformed Services Absent  
(City, Village or Post Office)

Voter's Ballot mailed or sent electronically to \_\_\_\_\_, a qualified elector who is  
(Name of Uniformed Services Voter)

serving in the Uniformed Services of the United States or is absent from Ohio for the purpose of being with or near his/her spouse or parent who is serving in the Uniformed Services. The elector's voting residence is:

\_\_\_\_\_, \_\_\_\_\_ Ohio, \_\_\_\_\_  
(Street and Number, or Rural Route Number) (City, Village or Township) (Zip Code)

The Uniformed Services voter resided there for \_\_\_\_\_ immediately preceding the  
(Length of time)  
commencement of the Uniformed Services member's service.

I am the \_\_\_\_\_ of the Uniformed Services voter to whom the ballot is to be sent.  
(Family relationship to Uniformed Services Voter - see categories below\*)

**What is Uniformed Services voter's birth date? (required)** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
(month) (day) (year)

**Identification in the form of ONE of the following must be provided below or accompany this application:**

- The Uniformed Services Voter's Ohio driver's license number \_\_\_\_\_, **or**  
(begins with two letters followed by six numbers)
- The last four digits of his/her social security number \_\_\_\_\_, **or**
- Copy** of a current and valid photo identification, a military identification, or a current (within one year) utility bill, bank statement, government check, paycheck, or other government document (other than a voter registration notification mailed by a board of elections) that shows the name and current address of the Uniformed Services voter for whom the absent voter ballot is requested.

**In which election does the Uniformed Services member wish to vote?**

**Check ONLY one** (A separate application must be completed for each election):

1.  **Primary Election:** \_\_\_\_\_  
(year)

- Constitution  Libertarian
- Democratic  Republican
- Green  Socialist  Nonpartisan or issues only

2.  **General Election** \_\_\_\_\_  
(year)

3.  **Special Election** \_\_\_\_\_  
(month and year)

**Mail ballot to:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Or, Fax ballot to:**

\_\_\_\_\_  
(Fax Number, including area code and/or country code)

**Or, E-mail ballot to:**

\_\_\_\_\_  
(E-mail address)

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

**X** \_\_\_\_\_  
(Signature of Relative\*)

\_\_\_\_\_  
(Date Signed)

\*A "relative" of a Uniformed Services voter means: the spouse, father, mother, father-in-law, mother-in-law, grandfather, grandmother, brother or sister of the whole blood or half blood, son, daughter, adopting parent, adopted child, stepparent, stepchild, uncle, aunt, nephew, or niece of the Uniformed Services voter.