

January 26, 2021

SAMPLE VOTER
123 SAMPLE DRIVE
SAYRE PA 18840

ANNUAL REQUEST TO VOTE BY MAIL

00000000-08

You are receiving this notice and application because you previously applied to vote by mail for a Pennsylvania election and at the time of your application you requested to be on the **permanent list of mail-in voters**. A permanent voter is someone who requested to receive either an absentee or a mail-in ballot automatically for every election for which they're eligible that year. Permanent voters are then given a choice to renew this request each future year if they choose.

If you would like to automatically receive a ballot by mail for each election in which you are eligible to vote this year, complete the application on the back of this notice and mail it to our office. Alternatively, you can conveniently request a ballot online by visiting **votesPA.COM/ApplyMailBallot**. The deadline to apply for a mail ballot is 5:00PM on the Tuesday before the election. Please note your application must be received by the county board of elections by the deadline. Postmarks do not count.

If you do not want to receive ballots for each election held this year, simply discard this notice. If you later change your mind, you can complete an application online or send the application by mail.

If you want to be removed from the list of permanent mail voters and no longer automatically receive an application for ballots, complete the *Request to Cancel My Permanent Voter Status* form below and return this notice to our office.

Please contact our office at 570-265-1717 if you have any questions.

Note: The form below should only be used if you want to be removed as a permanent voter.

REQUEST TO CANCEL MY PERMANENT VOTER STATUS

I am requesting for my permanent status to be canceled. If I would like to receive a mail ballot in the future, I understand I will need to reapply for one.

X

Voter Signature

Date

Scan this barcode to use the online application to request a mail-in ballot.



Scan this barcode to use the online voter registration application to update your name or address.



Permanent Mail-in Voter's Annual Application to Vote by Mail for 2021 Elections

By completing this form, you will be sent a mail-in ballot for all elections for which you are eligible in 2021

<p>Print your name Please print your name exactly as you registered to vote.</p>	1	<p>Last name VOTER</p> <p>First name SAMPLE</p>	<p>Suffix</p> <p>Middle name or initial</p>
<p>About you Phone and email are optional and used if information is missing on this form.</p>	2	<p>Birth date</p> <p>Phone</p>	<p>Email</p>
<p>Your address Please print your address exactly as you registered to vote. If your address has changed, please complete a voter registration application either online or submit it with this form.</p>	3	<p>Address (not P.O. Box) 123 SAMPLE DRIVE</p> <p>City/Town SAYRE</p> <p>Municipality</p> <p>Ward (if known)</p> <p>I have lived at this address since:</p>	<p>State PA Zip code 18840</p> <p>County</p> <p>Voting district (if known)</p>
<p>Where to mail ballot?</p>	4	<p><input type="checkbox"/> Same as above Address or P.O. Box</p> <p>City/Town State Zip code</p> <p>This address is my (e.g., vacation home, temporary mailing address, etc.)</p>	
<p>Identification If you have a PennDOT number, you must use it. If not, please provide the last four digits of your Social Security number.</p>	5	<p>PA driver's license or PennDOT ID card number</p> <p>Last four digits of your Social Security number X X X - X X -</p> <p><input type="checkbox"/> I do not have a PA driver's license or a PennDOT ID card or a Social Security number.</p>	
<p>Declaration</p>	6	<p>I declare that I am eligible to vote by mail-in ballot at the forthcoming primary or election; that I am requesting the ballot of the party with which I am enrolled according to my voter registration record; and that all of the information which I have listed on this mail-in ballot application is true and correct.</p>	
<p>Help with this form Complete this section if you are unable to sign the declaration in Section 6.</p>	7	<p>Voter signature here X Date</p> <p>I hereby state that I am unable to sign my application for a mail-in ballot without assistance because I am unable to write by reason of my illness or physical disability. I have made or have received assistance in making my mark in lieu of my signature.</p> <p>Mark of voter X Date</p> <p>Address of witness</p> <p>Signature of witness X</p>	

IMPORTANT WARNING: If you receive a mail-in ballot and return your voted ballot by the deadline, you may not vote at your polling place on election day. If you are unable to return your voted mail-in ballot by the deadline, you may only vote a provisional ballot at your polling place on election day, unless you surrender your mail-in ballot and envelope to the judge of elections to be voided to vote by regular ballot.