

I, _____, the undersigned applicant, do hereby apply for a mail-in ballot to be voted by me at the **PRIMARY** election to be held on **AUGUST 4, 2020**.

I would like a primary ballot for the party checked below

Republican Party

Libertarian Party

Green Party

Democratic Party

Constitution Party

Non-Partisan

*In a primary election, if you do not respond to the request for political party designation, the election authority is authorized to provide you with a non-partisan (issues only) ballot.

Residential Address

City, State, Zip

Mailing Address (**ONLY IF** different)

City, State, Zip

Telephone

Email

Date of Birth

SSN (last 4)

Missouri law requires that requests for absentee ballots must be received by 5:00 p.m. on the second Wednesday prior to Election Day if the ballot is mailed. The deadline for absentee voting in person in the office of the election authority is 5:00 p.m. on the day before the election. If you registered by mail and this is your first time voting, you must provide a copy of either: (1) an ID issued by the Federal Government, state of Missouri, or a local election authority; (2) ID issued by a Missouri institution (public or private) of higher education; or (3) a current utility bill, bank statement, paycheck, government check or other government document that contains your name and address.

I do solemnly swear that all statements made on this application are true to the best of my knowledge and belief.

Signature

Date

Please mail this **SIGNED** application to:
St. Charles County Election Authority
397 Turner Blvd
St. Peters, MO 63376

Application Received: ____/____,2020

Ballot Mailed: ____/____,2020