

CITY OF LANSING

REQUEST FOR ABSENTEE BALLOT

MAIL, DELIVER, FAX, OR EMAIL FORM TO:

CHRIS SWOPE, LANSING CITY CLERK
124 W. MICHIGAN AVENUE, 9TH FLOOR
LANSING MICHIGAN 48933-1695

FAX: (517) 377-0068
EMAIL: city.clerk@lansingmi.gov

General City Election - November 2, 2021

VOTER'S NAME _____

VOTER'S REGISTERED ADDRESS _____

- IN PERSON (receive ballot today)
- MAIL TO REGISTERED ADDRESS (above)
- MAIL TO OTHER ADDRESS:

<i>Mailing Address:</i>		
<i>City:</i>	<i>State:</i>	<i>Zip:</i>
<i>Date Leaving:</i> _____/_____/_____		

As a United States citizen and a qualified and registered elector of the City of Lansing, County of Ingham or Eaton, State of Michigan, I hereby apply for an official ballot, or ballots, to be voted by me at the election or elections indicated above.

I certify that I am a United States citizen and that the statements in this absent voter ballot application are true.

SIGNATURE OF VOTER _____ **DATE** _____

Voter contact information: Phone _____ Email _____

AUTOMATIC APPLICATION LIST

YES – I WANT THE OPTION TO VOTE FROM HOME IN ALL FUTURE ELECTIONS. AUTOMATICALLY SEND ME AN APPLICATION FOR EVERY ELECTION.

INSTRUCTIONS FOR APPLICANTS FOR ABSENT VOTER BALLOTS

Step 1. After completely filling out the application, sign and date the application in the place designated. Your signature must appear on the application or you will not receive an absent voter ballot.

Step 2. Deliver the application by 1 of the following methods:

(a) Place the application in an envelope addressed to the appropriate clerk and place the necessary postage upon the return envelope and deposit it in the United States mail or with another public postal service, express mail service, parcel post service, or common carrier.

(b) Deliver the application personally to the clerk's office, to the clerk, or to an authorized assistant of the clerk.

(c) In either (a) or (b), a member of the immediate family of the voter including a father-in-law, mother-in-law, brother-in-law, sister-in-law, son-in-law, daughter-in-law, grandparent, or grandchild or a person residing in the voter's household may mail or deliver the application to the clerk for the applicant.

(d) If an applicant cannot return the application in any of the above methods, the applicant may select any registered elector to return the application. The person returning the application must sign and return the certificate at the bottom of the application.

WARNING

You must be a United States citizen to vote. If you are not a United States citizen you will not be issued an absent voter ballot. A person making a false statement in this absent voter ballot application is guilty of a misdemeanor. It is a violation of Michigan election law for a person other than those listed in the instructions to return, offer to return, agree to return, or solicit to return your absent voter ballot application to the clerk. An assistant authorized by the clerk who receives absent voter ballot applications at a location other than the clerk's office must have credentials signed by the clerk. Ask to see his or her credentials before entrusting your application with a person claiming to have the clerk's authorization to return your application.

CHRIS SWOPE
LANSING CITY CLERK
124 W. MICHIGAN AVENUE, 9TH FLOOR
LANSING MICHIGAN 48933-1695
PHONE: (517) 483-4131
FAX: (517) 377-0068
EMAIL: city.clerk@lansingmi.gov
WEB: www.lansingvotes.com
www.facebook.com/LansingClerkSwope

Certificate of Authorized Registered Elector Returning Absent Voter Ballot Application

I certify that my name is _____, my address is _____, and my date of birth is _____; that I am delivering the absent voter ballot application of _____ at his or her request; that I did not solicit or request to return the application; that I have not made any markings on the application; that I have not altered the application in anyway; that I have not influenced the applicant; and that I am aware that a false statement in this certificate is a violation of Michigan election law.

PERSON ASSISTING VOTER: _____

Signature

_____ date