	STATE OF IOWA OFFICIAL ABSENTEE BALLOT REQUEST FORM					FOR OFFICE USE ONLY
	<u>Last</u> Suffix					
Your Name and Date of Birth	First Middle					
	Date of Birth (month, day, year)/					
ID Number Complete one	lowa Driver's License or Non-Operator ID Number: OR Four-digit Voter PIN (can be found on Voter Identification Card): Any voter may request a Voter Identification Card. Voters who do not appear in the lowa Dept. of Transportation's Driver's License or Non-Operator ID files are mailed an lowa Voter Identification Card at the time of registration. Any voter may request a Voter Identification Card.					
Your lowa Residential Address	Home Street Address (include apt, lot, etc. if applicable)					
	City You must be registered to v your voter registration if th	•	ceive an absentee b		_	County in the county, this form will be used to update ar registration record.
Where Your	Mailing Address/P.O. I	Вох				
Absentee Ballot Should Be Mailed If different than above	City		State			Zip
Contact Info	Country (other than U	SA)	Email			DO NOT ADD THIS INFORMATION
Important Election Date or	Phone Email					
Type Choose only one election.		General	Primary [City/School	Special:	
Primary Election Only	Check one political p	party Demo	cratic [Republican		
Requester Affidavi	it I swear or affirm the	at I am the person nan	ned above and I am	a registered vote	r or I am entitle	ed to register at the address listed on this form.
Powers of attorney do not have legal authority to request an absentee ballot for the election indicated above.						
on behalf of another.	Signature: X		(Date)			
Complete the section below if you are a person soliciting absentee ballot request forms on behalf of a political party, candidate, or committee as defined by Iowa Code Chapter 68A and are using this form as a receipt in accordance with Iowa Code Chapter 53.3. This section is not part of the official absentee ballot request form. RECEIPT FOR ABSENTEE BALLOT REQUEST This receipt must be left with the voter requesting the ballot.						
Voter's Name						
Election Type or D	ate General	Primary	City/School	Special:		
OR Election Date: / /						
Name of Political Agent Phone Number of Political Agent						
Political Party, Car	ndidate, or Committee					
Date and Time Re	quest Received by Agent					

NOTICE TO VOTER

You have requested an absentee ballot. This form was given to you by a person (agent) who is working with a political party, candidate, or committee. The person may also be working for a committee working to pass or defeat a question on the ballot. The county auditor will mail your ballot to you.

Request forms solicited by a political party, candidate or committee as defined by lowa Code chapter 68A are required by lowa law to be delivered to the appropriate county auditor's office within 72 hours of the date and time this request form was received by the soliciting agent or by 5 p.m. 15 days before the election, whichever is earlier.

The county auditor will mail you a ballot within 24 hours of receiving your request or within 24 hours of when the ballots are available. Ballots for primary and general elections are available 20 days before the election. Questions regarding this receipt should be directed to the political contact number listed above. Questions concerning your ballot should be directed to your county auditor.