

**STATE OF IOWA OFFICIAL ABSENTEE BALLOT REQUEST FORM**

FOR OFFICE USE ONLY

**YOUR NAME AND DATE OF BIRTH**

Last \_\_\_\_\_ Suffix \_\_\_\_\_  
 First \_\_\_\_\_ Middle \_\_\_\_\_  
 Date of Birth (month, day, year) \_\_\_\_/\_\_\_\_/\_\_\_\_

ABS SEQ NUM: \_\_\_\_\_  
 REG: OK \_\_\_\_\_ NR \_\_\_\_\_ CH \_\_\_\_\_  
 SPLIT: \_\_\_\_\_  
 BALLOT #: \_\_\_\_\_  
 Revised December 2022

**ID NUMBER Complete one**

Iowa Driver's License or Non-Operator ID Number: \_\_\_\_\_  
 OR  
 Four-digit Voter PIN (found only on Voter Identification Card): \_\_\_\_\_

Voters who do not appear in the Iowa Dept. of Transportation's Driver's License or Non-Operator ID files are mailed an Iowa Voter Identification Card at the time of registration. Any voter may request a Voter Identification Card.

**YOUR IOWA RESIDENTIAL ADDRESS**

Home Street Address (include apt, lot, etc. if applicable) \_\_\_\_\_  
 City \_\_\_\_\_ Zip \_\_\_\_\_ County \_\_\_\_\_  
*You must be registered to vote in the county to receive an absentee ballot. If you are registered to vote in the county, this form will be used to update your voter registration if the information provided on this form is different than the information on your registration record.*

**WHERE YOUR ABSENTEE BALLOT SHOULD BE MAILED**

If different than above

Mailing Address/P.O. Box \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Country (other than USA) \_\_\_\_\_

**CONTACT INFO Important**

Phone \_\_\_\_\_ Email \_\_\_\_\_  DO NOT ADD THIS INFORMATION TO MY VOTER RECORD

**ELECTION DATE OR TYPE**

Election \_\_\_\_/\_\_\_\_/\_\_\_\_  
 OR  General  Primary  City/School  Special: \_\_\_\_\_  
 Choose only one election.

**PRIMARY ELECTION ONLY**

Check one political party  Democratic  Libertarian  Republican

**REQUESTER AFFIDAVIT**

*I swear or affirm that I am the person named above and I am a registered voter or I am entitled to register at the address listed on this form. I am eligible to receive and vote an absentee ballot for the election indicated above.*

Powers of attorney do not have legal authority to request an absentee ballot on behalf of another.

Signature: **X** \_\_\_\_\_ Date \_\_\_\_\_

**ABSENTEE BALLOT REQUEST FORM INSTRUCTIONS**

A registered voter may make written application to their County Auditor for an absentee ballot starting 70 days before the election. A written application for a mailed absentee ballot must be received by the voter's County Auditor no later than 5:00 p.m. 15 days before the election.

In order to receive an absentee ballot, a registered voter **MUST** provide the following necessary information:

1. Name
2. Date of Birth
3. Iowa residential address
4. Voter Verification Number (ID Number)
  - Iowa Driver's License or Non-Operator ID Number OR
  - Four digit Voter PIN located on voter's Iowa Voter ID Card
  - Any voter may request an Iowa Voter ID Card by contacting their County Auditor's Office**
5. The name **OR** date of the election for which you are requesting an absentee ballot
6. Party affiliation - only required for Primary Elections, which are held in even numbered years
7. Signature and date the form was completed

All voters are encouraged to provide their phone number and/or email address in the event their County Auditor needs to confirm any information on the request form.

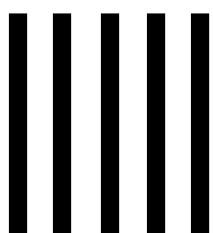
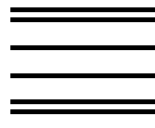
**If you have questions about absentee voting, please contact the County Auditor.**

Story County Administration Building  
 900 6th Street  
 Nevada, IA 50201  
 email: auditorweb@storycountyia.gov  
 ph. (515) 382-7210

ABSENTEE BALLOT REQUEST FORM

**BUSINESS REPLY MAIL**  
 FIRST-CLASS MAIL PERMIT NO. 33 NEVADA IA  
 POSTAGE WILL BE PAID BY ADDRESSEE

**LUCY MARTIN**  
**STORY COUNTY AUDITOR**  
**900 6TH ST STE 3**  
**NEVADA IA 50201-9912**



NO POSTAGE  
 NECESSARY  
 IF MAILED  
 IN THE  
 UNITED STATES