

STATE OF IOWA OFFICIAL ABSENTEE BALLOT REQUEST FORM		FOR OFFICE USE ONLY
<small>*Indicates required information</small>	<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>YOUR NAME* AND DATE OF BIRTH*</p> <p>Last _____ First _____ Middle _____ Date of Birth (month, day, year) ____/____/____</p> </div> <div style="width: 45%; border-left: 1px solid black; padding-left: 5px;"> <p style="text-align: right; font-size: small;">FOR OFFICE USE ONLY</p> </div> </div>	
ID NUMBER* <small>Complete one</small>	<p>Iowa Driver's License or Non-Operator ID Number: _____ ID Number is required.</p> <p>OR</p> <p>Four-digit Voter PIN (can be found on Voter Identification Card): _____ An absentee ballot cannot be issued until ID Number is provided.</p> <p style="font-size: x-small;">Voters without an Iowa Driver's License or Non-Operator ID number are mailed an Iowa Voter Identification Card at the time of registration.</p>	
YOUR IOWA RESIDENTIAL ADDRESS*	<p>Home Street Address (include apt, lot, etc. if applicable) _____</p> <p>City _____ Zip _____ County _____</p> <p style="font-size: x-small;"><i>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.</i></p>	
WHERE YOUR ABSENTEE BALLOT SHOULD BE MAILED <small>If different than above</small>	<p>Mailing Address/P.O. Box _____</p> <p>City _____ State _____ Zip _____</p> <p>Country (other than USA) _____</p>	
CONTACT INFO <small>Important</small>	<p>Phone _____ Email _____ <input type="checkbox"/> Do not add this contact info to my voter record</p>	
ELECTION DATE OR TYPE* <small>Choose only one election.</small>	<p>Election ____/____/____</p> <p>OR <input type="checkbox"/> General <input type="checkbox"/> Primary <input type="checkbox"/> School <input type="checkbox"/> City <input type="checkbox"/> Special: _____</p>	
PRIMARY ELECTION ONLY	<p>Check one political party <input type="checkbox"/> Democratic <input type="checkbox"/> Libertarian <input type="checkbox"/> Republican</p>	
REQUESTER AFFIDAVIT*	<p><i>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.</i></p> <p><small>Powers of attorney do not have legal authority to request an absentee ballot on behalf of another.</small></p> <p>Signature: X _____ Date _____</p>	

STATE OF IOWA OFFICIAL ABSENTEE BALLOT REQUEST FORM		FOR OFFICE USE ONLY
<small>*Indicates required information</small>	<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>YOUR NAME* AND DATE OF BIRTH*</p> <p>Last _____ First _____ Middle _____ Date of Birth (month, day, year) ____/____/____</p> </div> <div style="width: 45%; border-left: 1px solid black; padding-left: 5px;"> <p style="text-align: right; font-size: small;">FOR OFFICE USE ONLY</p> </div> </div>	
ID NUMBER* <small>Complete one</small>	<p>Iowa Driver's License or Non-Operator ID Number: _____ ID Number is required.</p> <p>OR</p> <p>Four-digit Voter PIN (can be found on Voter Identification Card): _____ An absentee ballot cannot be issued until ID Number is provided.</p> <p style="font-size: x-small;">Voters without an Iowa Driver's License or Non-Operator ID number are mailed an Iowa Voter Identification Card at the time of registration.</p>	
YOUR IOWA RESIDENTIAL ADDRESS*	<p>Home Street Address (include apt, lot, etc. if applicable) _____</p> <p>City _____ Zip _____ County _____</p> <p style="font-size: x-small;"><i>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.</i></p>	
WHERE YOUR ABSENTEE BALLOT SHOULD BE MAILED <small>If different than above</small>	<p>Mailing Address/P.O. Box _____</p> <p>City _____ State _____ Zip _____</p> <p>Country (other than USA) _____</p>	
CONTACT INFO <small>Important</small>	<p>Phone _____ Email _____ <input type="checkbox"/> Do not add this contact info to my voter record</p>	
ELECTION DATE OR TYPE* <small>Choose only one election.</small>	<p>Election ____/____/____</p> <p>OR <input type="checkbox"/> General <input type="checkbox"/> Primary <input type="checkbox"/> School <input type="checkbox"/> City <input type="checkbox"/> Special: _____</p>	
PRIMARY ELECTION ONLY	<p>Check one political party <input type="checkbox"/> Democratic <input type="checkbox"/> Libertarian <input type="checkbox"/> Republican</p>	
REQUESTER AFFIDAVIT*	<p><i>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.</i></p> <p><small>Powers of attorney do not have legal authority to request an absentee ballot on behalf of another.</small></p> <p>Signature: X _____ Date _____</p>	