

# ABSENTEE BALLOT REQUEST

## CITY OF LAKE BUTLER ELECTION

200 SW 1<sup>st</sup> St Lake Butler, FL 32054  
(386) 496-3401

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DATE: \_\_\_\_\_

### VOTER INFORMATION

Florida Law Requires **ALL** of the Information Listed In This Box When Requesting An Absentee Ballot.

**PLEASE PRINT**

\_\_\_\_\_  
ELECTOR'S FULL NAME

\_\_\_\_\_  
DATE OF BIRTH

\_\_\_\_\_  
ELECTOR'S ADDRESS

\_\_\_\_\_  
CITY/STATE

(\_\_\_\_)\_\_\_\_\_  
PHONE

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SOURCE OF REQUEST:

BALLOT REQUESTED FOR:

IN PERSON

CITY ELECTION

BY MAIL

OTHER \_\_\_\_\_

BY PHONE - TAKEN BY \_\_\_\_\_

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### ABSENTEE BALLOT REQUEST

#### IMMEDIATE FAMILY MEMBER OR LEGAL GUARDIAN ONLY

I HEREBY REQUEST AN ABSENTEE BALLOT FOR THE ELECTION LISTED ABOVE ON BEHALF OF:

VOTER'S NAME \_\_\_\_\_ VOTER'S DOB \_\_\_\_\_

REQUESTOR'S NAME \_\_\_\_\_

REQUESTOR'S DRIVER'S LICENSE # \_\_\_\_\_

REQUESTOR'S ADDRESS \_\_\_\_\_

RELATIONSHIP TO VOTER \_\_\_\_\_

REQUESTOR'S SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_