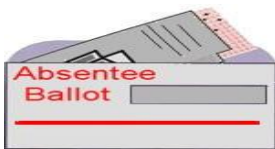


# APPLICATION TO VOTE BY MAIL



## Roane County Election Commission

200 E. Race St., Suite 8  
PO Box 157  
Kingston, TN 37763

Phone: 865-376-3184

Fax: 865-376-2017

web site: [www.roaneelections.com](http://www.roaneelections.com)

email: [admin@roaneelections.com](mailto:admin@roaneelections.com)

If you need to vote by mail, and meet one of the criteria below, fill out this application and return to us by mail or fax no later than the 7<sup>th</sup> day before the election.

Name: \_\_\_\_\_

Check the Election you wish to vote in:

Street Address: \_\_\_\_\_

General Election

\_\_\_\_\_

Democrat Primary

City/State/Zip: \_\_\_\_\_

Republican Primary

SSN: \_\_\_\_\_

Please Mail Ballot To: \_\_\_\_\_

\_\_\_\_\_

Assistance signatures: (Required if voter cannot sign, or if assistance is given.)

\_\_\_\_\_  
Signature of Person Assisting

\_\_\_\_\_  
Address

\_\_\_\_\_  
Date

### Check the reason that you are requesting to vote by mail:

- |  |  |
|--|--|
| <input type="checkbox"/> Age 65 or older   | <input type="checkbox"/> Observance of Religious Holiday                           |
| <input type="checkbox"/> Hospitalized, ill or disabled                                 | <input type="checkbox"/> Will be outside Roane County during entire election time. |
| <input type="checkbox"/> Caretaker   | <input type="checkbox"/> Resident of Nursing Home outside Roane County.            |
| <input type="checkbox"/> On the permanently disabled list (must have Dr's certificate) | <input type="checkbox"/> Candidate in the Election                                 |
| <input type="checkbox"/> Full Time Student   | <input type="checkbox"/> Serving as an Election Official                           |
| <input type="checkbox"/> Juror in State or Federal Court                               |  |
| <input type="checkbox"/> Truck Driver (must have copy of CDL)                          |  |

I hereby declare that:

- I wish to vote by mail
- I am a registered voter in Roane County, TN and the jurisdiction in which I am applying
- The following signature or mark on this application is mine
- I reside at the address listed on this application
- I have not previously voted in this election, nor will I attempt to vote at my polling place on election day
- I am aware that I can be convicted of a felony for giving false information on this application or attempting to vote in an election in which I am not entitled to.

X \_\_\_\_\_

Signature of Voter

\_\_\_\_\_  
Date