



CUYAHOGA COUNTY
BOARD OF ELECTIONS
PO Box 89448, Cleveland, OH 44101-6448

Vote by Mail Ballot Application

All Registered Voters May Vote by Mail

Instructions

Chapter 3509 of the
Revised Code of Ohio

1. An application by mail must be received by your county board of elections by noon on the third day before the election. Applications for persons who are hospitalized or for persons whose minor child is hospitalized due to an accident or unforeseeable medical emergency (Form 11-B) will be accepted until 3 p.m. on Election Day.
 2. If you return your ballot by mail, it must be received by your board of elections by 7:30 p.m. on Election Day or postmarked* no later than the day before Election Day and received by your county board of elections no later than 10 days after the election. If you return your ballot in person, or if a near relative delivers it to the board for you, it must be received by your county board of elections no later than the close of polls on Election Day. If you are a member of the uniformed services or a voter outside of the United States on Election Day, the ballot must be submitted for mailing not later than 12:01 a.m. on the date of the election and received by the board no later than 10 days after Election Day.
 3. A separate application must be completed for each election.
- * Postmarked does not include a date marked by a postage evidence system such as a postage meter.

1 Registered Voter's Name and Address

NAME _____
HOME ADDRESS _____
CITY _____ ZIP CODE _____
PHONE (Optional) _____ EMAIL (Optional) _____

Please fill out ONLY if ballot must be sent to a different address:

CARE OF / PO BOX _____
ADDRESS _____
CITY _____ STATE _____ ZIP CODE _____

2 Date of Birth (Must be provided)

Month	Day	Year
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3 Identification (Must provide either A, B, or C)

A The last four numbers of your Social Security Number

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B Your Ohio Driver's License Number

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NOTE: Your driver's license number begins with 2 letters and ends with 6 numbers. The number above your driver's license picture is not valid for voting purposes.

C Provide a copy of a current and valid photo identification, military identification, or a current (within the last 12 months) utility bill, bank statement, government check, paycheck or other government document (other than a voter registration notification mailed by a board of elections) that shows your name and current address.

4 Choose Election (Check only One)

1. **Primary Election** Select the Type of Ballot:
Month / Year _____ (Name of political party) Nonpartisan/Issues only

2. **General Election** Month / Year 3. **Special Election** Month / Year

5 Signature (Must be provided)

I wish to have a ballot mailed to me at the address listed above. I understand that if a ballot is mailed to me and I change my mind and appear at my polling place to vote on Election Day, I will be required to vote a provisional ballot that cannot be counted until at least 11 days after the election.

I hereby declare, under penalty of election falsification, I am a qualified voter and the statements above are true to the best of my knowledge and belief. I understand that if I do not provide the requested information, my application cannot be processed. WHOEVER COMMITS ELECTION FALSIFICATION IS GUILTY OF A FELONY OF THE FIFTH DEGREE.

X _____ DATE SIGNED _____

Complete all highlighted areas or your application cannot be processed.

1. Provide your **Name and Address**
2. Provide your **Date of Birth**
3. Provide one form of **Identification**
4. Indicate the **Type of Election** (For primary elections select the Type of Ballot)
5. Provide your **Signature**

If you have any questions, please call the Board of Elections at **216-443-VOTE (8683)**, Ohio Relay Service 711. For more election information, check our web site www.boe.cuyahogacounty.us