

Lake County Board of Elections
P.O. Box 490
105 Main St, - Suite 107
Painesville, OH 44077

Phone: 440-350-2700

FOR BOARD USE ONLY

County ID# _____

Pct _____ Split _____

Voter Name
Required

1

First _____ Middle _____
Last _____ Suffix _____

Date of Birth
Required

2

Date of Birth (do not write today's date here) _____ MM/DD/YYYY

**Address at Which
you are Registered
to Vote**
Required

3

Street Address (no P.O. boxes) _____ County _____
City/Village _____ ZIP _____

Mailing Address

Required only if you wish to
have your ballot mailed to a
different address than the
address at which you're
registered to vote.

4

Street Address (or P.O. box) _____
City/Village _____
State _____ ZIP _____

Identification
Required

You must provide ONE of the
following.

5

- Your Ohio driver's license number (2 letters followed by 6 numbers) _____ OR
 Last four digits of your Social Security number _____ OR
 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 notice of voter registration mailed by a board of elections) that contains your name and current address.

Election
Required

You must complete a separate
application for each election.

6

Date of Election (do not write today's date here) _____ MM/DD/YYYY

General Election **Special Election**

Primary Election For a PARTISAN primary election only, you must choose the type of ballot:
 Political party ballot Name of Political Party _____ Issues only ballot

Affirmation
Required

7

- I wish to have an absentee ballot mailed to me at the address listed above.
- I understand this request must be received by my board of elections no later than noon on the Saturday before Election Day if by mail or by 2 p.m. the day before the election if in person.
- I understand that if an absentee ballot is mailed to me and I change my mind and go to 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 Election Day.
- I understand that, if I do not provide the required information, my application cannot be processed.
- I hereby declare, under penalty of election falsification, that I am a qualified elector and the statements above are true.

Signature X _____

Today's Date _____ MM/DD/YYYY

To assist the board of election in contacting you in a timely manner if your application is incomplete, please provide the following information.

Telephone Number _____ E-mail Address _____

WHOEVER COMMITS ELECTION FALSIFICATION IS GUILTY OF A FELONY OF THE FIFTH DEGREE.