

Application for Ballot by Mail

April 2, 2019 Consolidated Election

ALERT: FIRST DAY TO MAIL BALLOTS FOR THE APRIL 2nd ELECTION IS MARCH 18, 2019.

April's ballots can be printed only after the winning candidates in the February primary are certified on March 12.

Consider the March 18th mailing date carefully when designating your ballot delivery address.

Please
Print Your
Information

Township/Precinct

Name

Address

City/Zip Code

Date of Birth

Email

Daytime Telephone

Read Oath
and Sign

As required by 10 ILCS 5/19-3, **I affirm** that I currently reside at the above listed address and precinct and have lived there for 30 or more days. **I further affirm** I am lawfully entitled to vote and understand that this application is a request for an official ballot by mail to be voted by me at this election and that I must submit a separate application for a ballot at each election. Under penalties provided in 10 ILCS 5/29-10, **I certify** the information in this application is true and correct.

I understand my ballot may be counted within 14 days after the election if: 1.) returned by mail with postage postmarked no later than Election Day or 2.) returned to the office of the election authority by the close of the polls on Election Day. **I understand** that voting a ballot prior to Election Day means I may not cast a ballot on Election Day. **I understand** that if I cast a ballot prior to Election Day I shall not be permitted to revoke that ballot or vote another ballot with respect to this election.

Signature of Applicant

_____ *Deseo recibir mis materiales electorales en español.*

Official Use
Signature verified by:

Alternate
Mailing
Address

MAIL MY BALLOT TO A DIFFERENT ADDRESS THAN ABOVE.

Return to
Clerk's
Office

**Return completed application no later
than noon on Thursday, March 28 to:**

Lake County Clerk, Voting by Mail Dept.
18 North County St.
Waukegan, IL 60085

INSTRUCTIONS FOR COMPLETING THE BALLOT APPLICATION

- If you wish to have your ballot mailed to an alternate address, record in the space provided.
- Provide your date of birth and contact information.
- **Sign application** on line indicated. If you are unable to sign, make an "X", have a witness sign next to your mark, and include the words "witnessed by".

For further information, call the Voting by Mail Department at (847) 377-2406.