

## REQUEST FOR ABSENTEE BALLOT

I, \_\_\_\_\_, declare that I am a resident and registered voter of Cape Girardeau County, Missouri, and do hereby request an absentee ballot for the following election(s):

**February 8, 2022 City Primary Election**

**April 5, 2022 General Municipal Election**

My home address where I am registered to vote in Cape Girardeau County is: \_\_\_\_\_  
(Street Address) (City, State, Zip)

Address where ballot is to be mailed if different than registration address: \_\_\_\_\_  
(Street Address) (City, State, Zip)

Last Four Digits of Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Telephone Number (Include Area Code): \_\_\_\_\_ E-mail: \_\_\_\_\_

### **Reason for Requesting an Absentee Ballot (check one reason):**

Absence on Election Day from the jurisdiction of the election authority in which I am registered

Incapacity or confinement due to illness or physical disability, including caring for a person who is incapacitated or confined due to illness or disability **(No Notary Required When Returning Voted Ballot)**

Religious belief or practice

Employment as an election judge at a location other than my polling place

Incarceration, although I have retained all the necessary qualifications for voting

Certified participation in the address confidentiality program established under sections 589.660 to 589.681 because of safety concerns

**(Optional)** I am permanently disabled and hereby request that my name be placed on the election authority's list of voters qualified to participate as absentee voters pursuant to Section 115.284, and that I be delivered an absentee ballot application for each election in which I am eligible to vote.

**I do solemnly swear that all statements made on this application are true to the best of my knowledge and belief.**

\*\*\*  
**SIGNATURE  
REQUIRED!**  
\*\*\*

\_\_\_\_\_  
Signature of Registered Voter



(Mark)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Person Assisting Voter (witness to mark, if applicable)

### **Return this completed form to the Cape Girardeau County Clerk's Office:**

By Mail: 1 Barton Square, Suite 301  
Jackson, MO 63755

By Email: [amseabaugh@capecounty.us](mailto:amseabaugh@capecounty.us)

By Fax: (573)204-2418

**All requests for a ballot to be mailed to a voter must be received in the County Clerk's Office by 5:00 p.m. on the 2nd Wednesday prior to the Election.**

### **Cast an absentee ballot in-person at one of our office locations:**

- County Administration Building  
1 Barton Square, Suite 301, Jackson -or-  
- Cape Girardeau Satellite Office  
2311 Bloomfield Rd, Suite 102, Cape Girardeau

**The deadline to absentee vote in-person is 5:00 p.m. on the Monday before Election Day.**

Questions? Call (573)243-3547