Wyandotte County Election Office
Application for Advance Voting Ballot

1 Affirmation
Affirmation of an Elector of the County of Wyandotte, and State of Kansas Desiring to Vote an Advance Voting Ballot

2 Voter Identification Requirements
You must provide with this application a Kansas driver’s license number or Kansas nondriver’s identification card number to receive a ballot.

Current Kansas driver’s license (or Kansas ID) number __________________________

If you do not have either number, you must provide with this application a copy, that shows your name and photo, of a current state driver’s license, state identification card, state concealed carry of handgun license, U.S. passport, a government employee ID or badge, U.S. military ID, student ID issued by an accredited postsecondary educational institution in Kansas, a public assistance ID card issued by a municipal, county, state, or federal government office or agency, or an identification card issued by an Indian tribe.

3 Personal Information

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>Middle Name</th>
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Date of Birth

month day year

Phone Number __________-_________ _______ _______ _______ _______

Residence Address

City State Zip

Political Party (complete only when requesting primary election ballots)

O Democratic O Republican (Other parties choose their candidates by caucus)

4 Mailing Address (if different from residence address)

Mailing Address

City State Zip

Note: The ballot may be mailed only to the voter’s residential or mailing address as indicated on the county voter registration list, to the voter's temporary residential address, or to a medical care facility where the voter resides. These restrictions do not apply to a voter who has an illness, disability or who lacks proficiency in the English language.

5 Voter Signature

I do solemnly affirm under penalty of perjury that I am a qualified elector residing at the address listed above, or I am authorized to sign for the above named voter who has a disability preventing the voter from signing the application. I am entitled to vote an advance voting ballot and I have not voted and will not otherwise vote at the election to be held on November 3, 2020.

Sign in box

Date ______ month ______ day ______ year

Send Application to: Wyandotte County Election Office, 850 State Avenue, Post Office Box 171767, Kansas City, KS 66117
Phone (913) 573-8500 FAX (913) 573-8580

Any person or group engaged in the distribution of advance voting ballot applications shall mail, fax or otherwise deliver any application signed by a voter to the county election office within 2 days after such application is signed by the applicant.

FOR OFFICE USE ONLY Voter # __________ Status _______ Ward/Precinct _______ - _______ School District _______
Voter ID/Signature Verified by ___________ Ballot Mailed _______ - _______ Initials ___________
NOTICE:

Do not use this application if you are not registered to vote!

Only registered voters are eligible to vote by advance ballot.

If you submitted an application for voter registration before the voter registration deadline, you may be eligible to vote at your polling place. You will receive a voter registration card in the mail before the election which will identify your authorized polling place.

Wyandotte County Election Office
850 State Avenue
Post Office Box 171767
Kansas City, KS 66117

VOTER IDENTIFICATION NOTICE:

Voter must provide a Kansas Driver’s License Number or Kansas ID Number on this application.

If you do not have these numbers, you must provide a copy of one of the acceptable forms of ID listed.

This application will not be processed unless voter provides required ID with the application.