## **1** Affirmation

Affirmation of an Elector of the County of <u>Wyandotte</u>, and State of <u>Kansas</u> 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

Last Name		First Name			Middle Name		
Date of Birth month	day	year	Р	hone Number	-	-	
Residence Address			City			State	Zip
Political Party - for F	RIMARY ELEC	TION ONLY - Cho	<mark>ose the pa</mark>	arty you are currently affilia	ted with		
O Democratic	O Republica	an O Libert	arian	O Unaffiliated			

Mailing Address	City	State	Zip
Note: The ballot may be mailed only to the voter's residential or ma	ailing address as indicated on the county voter registration list,	to the voter's ter	mporary residential address, or
to a medical care facility where the voter resides. These restrictions of	to not apply to a voter who has an illness, disability or who lack	ks proficiency in	the English language.

**5** Voter Signature

! False statement on this affirmation is a severity level 9, nonperson felony.

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  $\frac{November}{month}$   $\frac{8}{day}$   $\frac{2022}{year}$ .

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 ONL	Y Voter #		Status	Ward/Preci	nct			School District	
Voter ID/Signature Ver	rified by			Ballot Mailed			Init	tials	

## 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.

Place Stamp HERE

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

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**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.