## **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

∟ast Name		First Name			Middle Na	Middle Name		
Date of Birth	month	day	year	Phone Number	·			
Residence Ad	dress			City	State	Zip		
Political Party	- for PRI	MARY ELE	CTION ONLY -	Choose the party you are curre	ntly affiliated with			

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  $August month day \frac{01}{day} = \frac{2023}{year}$ .

Sign in box					Date	month	day	year
Send Application Phone (913) 57	•	te County Election FAX (913) 573-8		e Avenue, Post Offic	e Box 171	l 767, Kar	nsas City	γ, KS 66117
				ting ballot application n 2 days after such a				
FOR OFFICE USE O	NLY Voter #		Status	Ward/Precinc	t			School District
/oter ID/Signature \	Verified by		Ball	ot Mailed			Init	ials

## 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.