

**CITY OF HOMER  
ABSENTEE BALLOT APPLICATION**

You may mail this application or drop it off at City Hall-491 E. Pioneer Avenue, Homer, Alaska, 99603. You may also fax it to 907-235-3143, or email it to [clerk@ci.homer.ak.us](mailto:clerk@ci.homer.ak.us) Applications will not be accepted without a signature per HCC 4.30.030(1)

Please Print or Type and only one person per form/request.

**Name:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**City of Homer, Alaska Residential Address:** \_\_\_\_\_  
(Physical Address Only. No PO Boxes)

**Send my ballot to the following address:** \_\_\_\_\_

OR

**Fax Number:** \_\_\_\_\_

OR

**Email:** \_\_\_\_\_

**This application is for the following City of Homer elections:**

**General Municipal Election**       **Run-Off Election**       **Special Election**

General Elections are held the first Tuesday in October; Run-Off Elections are scheduled if needed on the first Tuesday after the first Monday in November; Special elections are scheduled as needed.

**Voter Identification: You must provide at least one of the following:**

**Voter Registration Number** \_\_\_\_\_ **Birth Date:** \_\_\_\_\_

**Last 4 numbers of your Social Security No.** \_\_\_\_\_

**Oath:**

I declare that I am a legal resident of the City of Homer, Alaska and possess the qualifications of a legal voter of the State and City.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Your signature is required for this application to be valid.

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**OFFICE USE ONLY**

District/Precinct \_\_\_\_\_

Date Ballot Sent or Faxed \_\_\_\_\_

Date Ballot Received \_\_\_\_\_

Comments \_\_\_\_\_