

**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 Applications will not be accepted without a signature per HCC 4.30.030(1)

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

Name: _____

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. _____

This application does not change your address. If you have moved you must contact the City Clerk's office at 907-235-3130 or an elections registrar for information on updating your voter information.

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 _____