

South Dakota Absentee Ballot Application Form _____County

Please print and return to your county auditor. A new application must be completed each calendar year.							
You may apply for an absentee ballot before 5:00 p.m. the day before the election for any or all general, primary, municipal, school, or any other elections conducted in this calendar year with one request. Additional information on absentee voting is available at sdsos.gov.							
	Last Name First Name			Middle Name(s)/Initial	entee voting is a	Suffix	
1	Last Name First Name			whate warne(s)/ initial		Suma	
-							
	Voter Registration Address		Apt. or Lot#	City, State		Zip Code	
2	-					·	
	Absentee ballot mailing address (if different from Section #2)			City, State		Zip Code	
3							
SELECT THE ELECTION(S) YOU ARE REQUESTING AN ABSENTEE BALLOT FOR: If your address changes after this is submitted, you must submit a new form							
JL	☐ All ☐ General ☐ Primary ☐ Municipal ☐ School ☐ Any Other						
4	If you are registered as an independent/no party affiliation and are requesting a Primary Election ballot, you may have a choice of the following:						
	□ Democratic □ Libertarian □ Non-Political (You can only mark one selection.)						
	Daytime telephone number If request is for a municipal or school election:						
5		•	st 30 days in the last year.				
	I am a full-time student who resided in that jurisdiction prior to leaving. ☐ YES ☐ NO						
MILITARY AND OVERSEAS CITIZENS ONLY:							
	☐ YES ☐ NO - I am a member of the Uniformed Services or Merchant Marine on active duty						
	☐ YES ☐ NO - I am an eligible spouse or dependent of a member of the Uniformed Services or Merchant Marine on active duty ☐ YES ☐ NO - I am a U.S. citizen residing outside the United States						
	If you checked no for all questions, proceed to section #7.						
	If you would like your ballot sent electronically (for Primary and General Elections ONLY) instead of first class mail, provide your e-mail address:						
6							
	E-mail address (MILITARY AND OVERSEAS CITIZENS ONLY):						
*An overseas military, overseas citizen, or stateside military, a spouse or dependent of the same, voter is no						equired to submit a photocopy	
	of the voter's ID.						
*Any military and overseas voter may submit a signed application for absentee ballot by fax or e-mail.							
	An acceptable ID is: A South Dakota driver's license or non-driver ID card, a passport or other picture ID issued by the United States government, a tribal photo ID, or a current student photo ID issued by a South Dakota high school or postsecondary education institution.						
	a tribal prioto ib, of a current student prioto ib issued by a south bakota high school of postsecondary education histitution.						
	☐ Copy of photo identification is a						
	☐ I hereby verify that I am the per	and these					
	statements made by me on this application are true and correct.						
7	Sworn to me before this da	y of		Voter's Signature (required)			
	(Seal) Notary Signature Voter's Date of Signing (required): / /						
	Notary Signature		Month / Day / Year				
			V. T J III				
AUTHORIZED MESSENGER REQUEST DUE TO SICKNESS OR DISABILITY ONLY: The deadline to request is 3:00 p.m. on Election Day As a registered voter, I authorize							
	Last Name		st Name		Daytime teleph	none	
	Lust Name	'"	3t Hume		Daytime teleph	ione	
	Address	Ap	t. or Lot #	City, State	Zip	Code	
6							
8	to serve as my authorized messenger to pick up my absentee ballot. I			As the authorized messenger, I acknowledge receipt of the ballot for			
	further certify under penalty of law that I am confined because of			the above named voter onDate:Time:			
	sickness or disability and for this reason alone am unable to vote at my polling place on Election Day.			Are you serving as an authorized messenger for any other voter?			
	Politing place of Liection Day.			Are you serving as an authorized messenger for any other voter?			
					. =	-	
1	Voter's Signature			Autho	Authorized Messenger's Signature		