

FORM FOR PERSONAL DELIVERY OF VOTE-BY-MAIL BALLOT

Section I. Emergency Pick-up Affidavit

(Complete if receiving a vote-by-mail ballot on or within 10 days of and up to 7 p.m. on Election Day.)

I hereby swear or affirm that the following emergency prevents _____
from voting at an Early Voting site or at their Election Day polling place: Voter's Name (Print)

(specify emergency)

I understand that any person who willfully swears or affirms falsely to any affirmation in connection with elections and any person who perpetrates any fraud in connection with any vote to be cast in an election may be subject to criminal penalties up to and including a felony of the third degree and fined up to \$5,000 and/or imprisoned for up to five years. **Under penalties of perjury, I declare that I have read the foregoing affidavit and that the facts stated in it are true.**

Voter's Name (Print) / _____
Voter's Signature / _____
Date (MM/DD/YYYY)

Section II. Designee Affidavit

(Complete if you are a designee picking up a ballot for a voter.)

I hereby swear or affirm that I have been designated by _____ to pick up a
Vote-by-Mail ballot on their behalf for this election. The voter: Voter's Name

- Is a member of my immediate family: _____, or
 Other: _____ Relationship

I understand that any person who willfully swears or affirms falsely to any affirmation in connection with elections and any person who perpetrates any fraud in connection with any vote to be cast in an election may be subject to criminal penalties up to and including a felony of the third degree and fined up to \$5,000 and/or imprisoned for up to five years. **Under penalties of perjury, I declare that I have read the foregoing affidavit and that the facts stated in it are true.**

Designee's Name (Print) / _____
Designee's Signature / _____
Date (MM/DD/YYYY)

Section III. Voter's Authorization of Designee

(Complete if voter's authorization is not already on file.)

I, the voter, designate _____ to pick up my ballot for this election.
Print designee's name

Voter's Name (Print) / _____
Voter's Signature / _____
Date (MM/DD/YYYY)

*Voter's Date of Birth (MM/DD/YYYY) or Voter ID number / _____
Voter's Registration Address

Instructions

- The voter's signature on the written authorization must match the signature of the voter on file.
- The designee shall provide to the Supervisor written authorization by the voter.
- The voter or designee shall provide a photo ID.
- *Voter's Date of Birth or Voter ID number not required but may be helpful to locate voter file.