

I REQUEST AN ABSENTEE BALLOT FROM THE DAVIDSON COUNTY ELECTION COMMISSION FOR
Special Election, Council District 29
Tuesday, February 12, 2019

1. Print Name: _____ 2. Phone #: _____

3. Davidson Co. address where you live: _____
_____ Check if New Address

4. Mail my absentee ballot to this address. (Please Print): _____

5. Date of Birth: _____ 6. ENTIRE Social Security #: _____ - _____ - _____

7. E-mail: _____

8. My legal reason for voting Absentee is (CHECK ONE):

- ____ I am over 60 years of age.
- ____ I will be outside of Davidson County during all hours of Early Voting (Jan 23–Feb 7) and Election Day.
- ____ I am enrolled as a full-time student (or spouse of a student) at an institution outside Davidson County.
- ____ I am a voter with a disability and my polling place is inaccessible.
- ____ I reside in a licensed facility, outside the county, providing relatively permanent care, i.e. nursing home.
- ____ I am hospitalized, ill, or physically disabled, and I am unable to appear at my polling place for this election.
- ____ I am a caretaker of a person who is hospitalized, ill or physically disabled.
- ____ I am a candidate.
- ____ I am on jury duty in a state or federal court.
- ____ I am serving as an election official or a member or employee of the Election Commission on Election Day.
- ____ I am observing a religious holiday that prevents me from voting early or on Election Day.
- ____ I have a Commercial Driver's License (CDL) or spouse or a person possessing a CDL or a Transportation Worker Identification Credential (TWIC), will be out of county during Early Voting and Election Day, and have no specific out-of-county or out-of-state address to receive mail during this time. Enclosed is a copy of my CDL or my spouse's CDL or my TWIC card. The CDL# is _____.
- ____ I am a member of the military, spouse, or dependent, an activated National Guard member on state orders, overseas citizen and otherwise qualified to vote in Tennessee (must include mailing address outside county (#4) even if ballot is emailed). Ballot sent by: Mail Email: email address _____

I swear or affirm, under the penalty of perjury, that all information on this form is true and correct and that I am eligible to vote in the election.

SIGNATURE OF VOTER: _____

Digital Signature NOT Accepted.....Original Signature REQUIRED

First day to receive is **11/27/18**.

Last day completed form must be received for processing by this office:

If voter cannot sign or if assistance is given the following is REQUIRED:

Signature **and** address of person assisting: _____

Signature **and** address of person witnessing: _____

Feb. 5, 2019

Mail, Fax, OR Email (with a scanned signature) to:

ATTN: Absentee Department
Davidson County Election Commission
P.O. Box 650
Nashville, TN 37202-0650

For information:

(615) 862-8815
TTY (800) 848-0298 or Relay 711
www.nashville.gov/vote

Fax: (615) 880-1729

Email: moaballot@nashville.gov