Early Voting Clerk, you must also send the original hardcopy to the Early Voting Clerk. If you are faxing or emailing this form on or near the deadline to apply for a Ballot by Mail, you must send the original hardcopy so that the Clerk receives it no later than the fourth business day after the day the Clerk received your email or fax. Original signatures are required on both the fax or email image and the physical hard copy. Electronic signatures are not permitted. THE HARDCOPY OF THIS APPLICATION MUST BE RECEIVED BY THE EARLY VOTING CLERK AND MEET ALL LEGALLY REQUIRED DEADLINES. Please read the instructions on the back of this form completely. If you have any questions, please call the Early Voting Clerk in your county of registration or the office of the Texas Secretary of State at 1-800-252-8683 or log on to www.sos.texas.gov for a list of County Early Voting Clerks and their email and physical addresses.		
1. Voter Information: Please print all information clearly and legibly		YOU MUST PROVIDE ONE of the following numbers
Name: Last, First, Middle Residence Address as shown on your Voter Registration Certificate	Suffix (Jr., Sr.)	Texas Driver's License, Texas Personal Identification Number or Election Identification Certificate Number issued by the Department of Public Safety (NOT your voter registration VUID#)
		If you do not have a Texas Driver's License, Texas Personal
Address: Street Apt.#(ifany) City Optional Information Desiriting this information in bulleful to the Forb Veries Clark but a second	State Zip Code	Il you do in lave a l'exas Driver si cledise, lexas Personal Identification Number or a Texas Election Identification Certificate Number, give the last 4 digits of your Social Security Number
Optional Information: Providing this information is helpful to the Early Voting Clerk, but not red		XXX-X <mark>X</mark>
Date of Birth: ///		☐ I have not been issued a Texas Driver's License/Texas Personal Identification Number/Texas Election Identification Certificate or Social Security Number
2. Mail my Ballot to:		Social Security Number
My Residence Address (as listed on my Voter Registration Certificate) Other Address - You may use the Other Address line only if the other address fits one of the categorie Address Apt. # (if an	17 (18 (19) (19) (19) (19) (19) (19) (19) (19)	State Zip Code
My Other Address is: (Check one) The mailing address listed on my Voter Registration Certificate Address Outside the County (voters absent from the county)	,	
Hospital, Nursing Home, Long-Term Care Facility, Retirement or Assisted Living Center or a Relati	ve	
Address of the Jail/Civil Commitment Facility or a Relative		(Indicate Relationship)
 65 Years of Age or Older Disability (as defined in Texas Election Code 82.002(a), see instructions on reverse) By checking this box, "I affirm that I have a sickness or physical condition that prevents me from appearing at the polling place on Election Day without a likelihood of needing personal assistance or of injuring my health." Expected to give birth within three weeks before or after Election.Day. Expected Absence from the County (You may apply for a ballot for one election and its resulting runoff, if your dates of absence from the county include both elections) Date you can begin to receive mail at your out of county address:/		
4. Send me a Ballot for the Following Elections:		
Annual Application Send me a ballot for all Elections in this voting year (January – December) Annual Applications only available for voters 65 and older and voters with disabilities. You must select a party if you wish to vote in a primary. Select only one party's primary and its resulting runoff. Primary Election (even numbered years only) Democratic Primary Any Resulting Runoff Republican Primary Any Resulting Runoff Do Not Send me a Primary Ballot	☐ Any Resulting Rund OR Primary Election (eve) ☐ Democratic Primary ☐ Republican Primary	May Election (not a primary runoff) off
5. Sign Here:		
"I certify that the information given in this application is true, and I understand that givin	ng false information in this a	pplication is a crime."
X If applicant is unable to sign or make a mark (in the presence of a witness), the witness must complete the signature made with a pen and ink. Electronic signatures are not permitted.	ne witness portion in Box 6 belov	v. The signature or mark of the voter in the blank above must be an original
6. If someone helps you complete this form or mails, emails or faxes the form for yo	u, that person must comp	ete the section below.
Instructions for Witnesses and Assistants: See back of this form for the definitions of Witness and Assistant Check one or both boxes below if you served as a Witness, an Assistant or both. All information below the applicant is unable to make a mark, you must check this box and complete all information below Witness—If you are acting as a Witness to the applicant's signature or mark or signing on the applicant Assistant—If you assisted the applicant in completing this application in the applicant's presence or mark or complete this section is a Class A Misdemeanor if applicant's signature was witnessed or applicant in the applicant in the applicant's signature was witnessed or applicant in the applican	ow must be completed! w. Do not sign for the voter in Bo int's behalf, you must state your i nailed/emailed/faxed the applica	relationship to the applicant here:
X		

Application for a Ballot by Mail

Signature of Witness/Assistant

Street Address

Apt. # (if any)

Printed Name of Witness/Assistant

City

Zip Code

State