

**Application for Advance Voting Ballot**Form **AV1****1 Affirmation**

Affirmation of an Elector of the County of Wyandotte, and State of Kansas Desiring to Vote an Advance Voting Ballot

**2 Voter Identification Requirements**

You must provide with this application a Kansas driver's license number or Kansas nondriver's identification card number to receive a ballot.

Current Kansas driver's license (or Kansas ID) number \_\_\_\_\_

If you do not have either number, you must provide with this application a copy, that shows your name and photo, of a current state driver's license, state identification card, state concealed carry of handgun license, U.S. passport, a government employee ID or badge, U.S. military ID, student ID issued by an accredited postsecondary educational institution in Kansas, a public assistance ID card issued by a municipal, county, state, or federal government office or agency, or an identification card issued by an Indian tribe.

**3 Personal Information**

Last Name

First Name

Middle Name

Date of Birth

month

day

year

Phone Number

\_\_\_\_

\_\_\_\_

\_\_\_\_

-

\_\_\_\_

\_\_\_\_

-

\_\_\_\_

\_\_\_\_

\_\_\_\_

Residence Address

City

State

Zip

Political Party (complete only when requesting primary election ballots)

☐ Democratic☐ Republican

(Other parties choose their candidates by caucus)

**4 Mailing Address (if different from residence address)**

Mailing Address

City

State

Zip

**Note:** The ballot may be mailed only to the voter's residential or mailing address as indicated on the county voter registration list, to the voter's temporary residential address, or to a medical care facility where the voter resides. These restrictions do not apply to a voter who has an illness, disability or who lacks proficiency in the English language.

**5 Voter Signature**

**! False statement on this affirmation is a severity level 9, nonperson felony.**

I do solemnly affirm under penalty of perjury that I am a qualified elector residing at the address listed above, or I am authorized to sign for the above named voter who has a disability preventing the voter from signing the application. I am entitled to vote an advance voting ballot and I have not voted and will not otherwise vote at the election to be held on \_\_\_\_\_.

month

day

year

Sign in box

Date

month

day

year

Send Application to: Wyandotte County Election Office, 850 State Avenue, Post Office Box 171767, Kansas City, KS 66117  
Phone (913) 573-8500 FAX (913) 573-8580

Any person or group engaged in the distribution of advance voting ballot applications shall mail, fax or otherwise deliver any application signed by a voter to the county election office within 2 days after such application is signed by the applicant.

FOR OFFICE USE ONLY Voter # \_\_\_\_\_ Status \_\_\_\_\_ Ward/Precinct \_\_\_\_\_ - \_\_\_\_\_ School District \_\_\_\_\_

Voter ID/Signature Verified by \_\_\_\_\_ Ballot Mailed \_\_\_\_\_ Initials \_\_\_\_\_

**NOTICE:**

**Do not use this application if you are not registered to vote!**

**Only registered voters are eligible to vote by advance ballot.**

**If you submitted an application for voter registration before the voter registration deadline, you may be eligible to vote at your polling place. You will receive a voter registration card in the mail before the election which will identify your authorized polling place.**

----- *Fold here* -----

Place  
Stamp  
HERE

**Wyandotte County Election Office  
850 State Avenue  
Post Office Box 171767  
Kansas City, KS 66117**

----- *Fold here* -----

**VOTER IDENTIFICATION NOTICE:**

**Voter must provide a Kansas Driver's License Number or Kansas ID Number on this application.**

**If you do not have these numbers, you must provide a copy of one of the acceptable forms of ID listed.**

**This application will not be processed unless voter provides required ID with the application.**