

CITY OF FARMINGTON HILLS
CITY CLERK'S OFFICE
31555 ELEVEN MILE ROAD
FARMINGTON HILLS, MI 48336-1165

NON-PROFIT
ORGANIZATION
U.S. POSTAGE
PAID
PERMIT NO. 36
FARMINGTON
HILLS, MI



OFFICIAL ELECTION MATERIAL

FORWARDING SERVICE REQUESTED

**PRINT FORM AND FAX TO 248-871-2411
OR MAIL THE FORM TO:**

**(Must put in envelope with proper postage,
if mailing)**

**City Clerk's Office
31555 Eleven Mile Road
Farmington Hills, MI 48336**

Please PRINT your name and registered
address below:

Name: _____

Registered
Address: _____

**DO NOT DETACH
RETURN ENTIRE FORM**

**APPLICATION FOR ABSENT VOTER'S BALLOT
PRESIDENTIAL PRIMARY: FEBRUARY 28, 2012**

As a duly qualified and registered elector in the CITY OF FARMINGTON HILLS, County of OAKLAND, State of Michigan, I hereby make application for an official ballot, to be voted by me at the election indicated above.

Check reason why you are requesting a ballot

- I am 60 years of age or older.
- I am physically unable to attend the polls without assistance of another.
- I am an appointed precinct worker in a precinct other than the precinct where I reside.
- I expect to be absent from the community in which I am registered for the entire time the polls are open on election day.
- I cannot attend the polls because of the tenets of my religion.
- I cannot attend the polls because I am confined to jail awaiting arraignment or trial.

DATE OF BIRTH

/ /

ARE YOU A UNITED STATES CITIZEN?

YES NO

FOR CLERK'S USE ONLY

Mailed _____
Ballot No. _____
Returned _____
Clerk _____

COMPLETE ONLY IF YOU WANT YOUR BALLOT SENT TO AN ADDRESS OTHER THAN YOUR REGISTERED ADDRESS

DATE LEAVING

NOTE: Michigan law requires that A.V. Ballots be sent to your registered address unless you are hospitalized, institutionalized, or at an address outside of your community. Complete the following ONLY if you want your ballot sent to an address outside of your community or to a hospital or other institution.

PLEASE PRINT (ADDRESS) (STREET)

(CITY) (STATE) (ZIP)

**WARNING: A PERSON WHO
MAKES A FALSE STATEMENT
IN THIS DECLARATION IS
GUILTY OF A MISDEMEANOR.**

**SIGN
HERE**

Signature of Absent Voter **X** _____ Date _____
I declare the foregoing statements to be true

**SEE REVERSE SIDE
FOR INSTRUCTIONS**

VOTER CONTACT INFO

I hereby request the ballot type marked at right for this election. (You must select ONE ballot type at right. If you do not select a ballot type, a ballot will NOT be issued to you.)

PLEASE PRINT

Home Phone: () _____ Call Phone: () _____

Email: _____

IMPORTANT! YOU MUST SELECT ONLY ONE BALLOT TYPE.

REPUBLICAN PARTY
Presidential Primary Ballot

DEMOCRATIC PARTY
Presidential Primary Ballot