

Application for Absentee Facsimile Ballot

Absent Uniformed and Resident/Nonresident Overseas Electors

THE FAXED APPLICATION SHALL BE FILED NO LATER THAN THE CLOSE OF BUSINESS (5:00PM MST) ON THE FRIDAY IMMEDIATELY PRECEDING THE ELECTION.



To: Nancy R. Amick, Rio Blanco Co. Clerk
 PO Box 1067 – Meeker, CO 81641
 (970) 878-9460 Phone
 (970) 878-3587 FAX

UOCAVA CITIZEN STATUS (*MUST check one*)

I am absent from the state and wish to vote by facsimile ballot in the following Elections:

- November 1, 2005 Coordinated Election
- Next two consecutive General Elections

- Member of Uniformed Services
- Member of Merchant Marine
- Spouse/Dependent of (1) or (2) Above
- Resident Overseas Voter
- Nonresident Overseas Voter (*Federal Ballot Only*)

Voter's Fax Number

You MUST provide the phone number that will be used to send you a fax your ballot from the United States.

Send my facsimile ballot to:



()
International
Prefix

()
International
Country Code

()
Local Area/Province/
City Code

()
Local
Number

Example:
(Geneva, Switzerland)

(**011**)
International
Prefix

(**49**)
International
Country Code

(**30**)
Local Area/Province/
City Code

(**124456789**)
Local
Number

Last Name (Required) First Name (Required) Middle Initial			Previous Name of Applicant – If Applicable		
Colorado Residential Address (Required) Apt. No.		City/Town (Required)	State	Zip (Required)	County
Date of Birth (Required)	Social Security Number OR Last 4 digits (Optional)	Daytime Phone (Optional)		Email Address (Optional)	
MM / DD / YYYY	- -	()			

Party Affiliation: If you are currently Unaffiliated and wish to vote in a Primary Election, you must declare an affiliation with a political party. Unaffiliated voters may affiliate with a political party up to, and including Primary Election Day. If you are currently affiliated with a political party and wish to change your affiliation, you must submit this change request at least 29 days prior to Election Day.

Party Affiliation: _____ OR UNAFFILIATED

**I UNDERSTAND THAT BY VOTING IN THIS MANNER,
I AM VOLUNTARILY WAIVING MY RIGHT TO A SECRET BALLOT.**

Please do not write outside the box

**SIGNATURE or
Mark (Required)**



Date / /
MM DD YYYY

* **Witness Signature**

* The application for an absentee ballot shall be personally signed by the applicant; or, in case of the applicant's inability to sign, the elector's mark shall be witnessed by another person.