



Vote By Mail Ballot: Designation of Agent

Instructions: Complete this form if you need someone to return a vote by mail ballot application and pick up your vote by mail ballot. On this form, you can name the person to do this for you. If you need help completing or signing this form, someone may help you. The person helping you must complete Part 3: Certificate of Assistance.

You may select any person to be your agent as long as the person is at least 18 years old and is not a candidate on your ballot. The individual you name to pick up and deliver the vote by mail ballot to you must complete Part 2 of this form and submit this form when he or she delivers your vote by mail ballot application to the local board of elections.

Part 1: This part must be completed by the voter.

I designate the following person, who is at least 18 years old and not a candidate on my ballot, to act as my agent

(Print Name: First, Middle Initial, Last)

(Print Address)

Signature of Voter

Date

Part 2: This part must be completed by the agent.

Under penalty of perjury, I hereby certify that I am at least 18 years of age and not a candidate on the voter's ballot. I also certify that I am acting as the voter's designated agent and will pick up and deliver the vote by mail ballot to the voter.

Signature of Agent

Date

Part 3: Certificate of Assistance. If you need help completing this form because you have a disability or are unable to read or write, the person helping you must complete this section.

Under penalty of perjury, I hereby certify that the voter named above, who requires assistance because of disability or inability to read or write, authorized me to complete this application for him/her. If the voter was unable to sign this application because of a disability or inability to read or write, I have printed the voter's name on the Signature of Voter line, followed by my initials.

Signature of Agent

Date

Printed Name of Agent

