APPLICATION FOR PERMANENT VOTE BY MAIL STATUS

Knox County Clerk/Recorder 200 S. Cherry Street Galesburg, IL 61401 Phone 309-345-3858



Dear Voter,

I am pleased to provide information about the Permanent Vote by Mail Program which helps voters who prefer to receive their ballots by mail in all or most elections.

Completing and mailing the enrollment application below for the program <u>automatically causes you to receive a ballot</u> for the elections that you designate. This is not a request to vote by mail in one election only. Enrollment in the program remains in effect until you provide notification to cancel or your voter registration becomes inactive.

To enroll, you must be a registered voter in Knox County, Illinois. You must complete and mail the form below to the County Clerk's office. Please select whether to receive a ballot for all elections or only elections that do not require a party designation.

If you have any questions, please contact the County Clerk's office at (309) 345-3858 or email our office at elections@knoxcountyil.gov.

Sincerely, Scott Erickson Knox County Clerk/Recorder			4
Scott Erickson Knox County Clerk/Recorder 200 S. Cherry Street Galesburg, IL 61401	APPLICATION FOR PERMANENT V	OTE BY MAIL STATUS Voting By Mail Information (309) 345-3858	FOR COUNTY USE ONLY Application Date:
Please notify the Knox County Clerk immediately if permanent registration address changes.			
TYPE or PRINT CLEARLY			
VOTER NAME	TELEPHONE		
HOME ADDRESS			
CITY, STATE, ZIP CODE			
BIRTH DATE	EMAIL		
I am currently a registered voter and wish to apply for permanent vote by mail status.			
I state that I reside at the address specified above, that I have lived at such address for 30 days or more preceding this election, that I am lawfully entitled to vote at the next regularly scheduled election, and that:			
I hereby make application for an official ballot to be voted by me at such election, and I agree that I shall return such ballot to the official issuing the same prior to the closing of the polls on the date of the election or, if returned by mail, postmarked no later than Election Day, for counting no later than during the period for counting provisional ballots, the last day of which is the 14th day following Election Day. Under penalties as provided by law pursuant to 10 ILCS 5/29-10, the undersigned certifies that the statements set forth in this application are true and correct.			
MAILING ADDRESS for ballot (if different from registration address):			
Number and Street / P.O. BO	X City	State	Zip Code
DATE	VOTER'S SIGNATURE		

Enrollment will not be processed if form not completely filled out and signed.