

Foolproof Steps for Voting Absentee

(1) Print & Complete Absentee Request Form (see Page 2 for 12 required fields):

http://sos.ga.gov/admin/uploads/absentee_ballot_app_201431.pdf

(2) Scan the signed form or take a picture of the form with smartphone

(3) Email completed form to:

- Dekalb: voterreg@dekalbcountyga.gov
- Cobb: Info@cobbelections.org
- Fulton: Elections.Absentee@fultoncountyga.gov

Include this text in the body of your email:

Please see the attached Absentee Ballot Request. Can you please reply to confirm you received it?

(4) You should receive a confirmation email within 24 hours. Following is a sample response that you should expect to receive:

We have received your applications and will process them within 24 hours.

Respectfully,

H. Maxine Daniels, Director

DeKalb County Registration & Elections

Office: 404-298-4020 Fax: 404-298-4038

www.dekalbvotes.com

(5) Complete and Submit Absentee ballot when you receive it

(6) **MOST IMPORTANTLY,**

Confirm your absentee ballot was Accepted:

<https://www.mvp.sos.ga.gov/MVP/mvp.do>

The screenshot shows the MVP website interface. On the left, there are navigation tabs for 'My Voter Page', 'Elections', 'News Items', 'Professional Licensing Boards', 'Services', and 'Charities'. The main content area is divided into several sections: 'My Voter Page', 'Voter Information', 'Polling Place for State, County, and Municipal Elections', 'Absentee Ballot Request Information', 'Your Elected Officials', and 'Election Dates'. A red banner at the top right reads 'Absentee Ballot Status'. Below this banner, there are two columns of information for different elections. The first column is for the April 18, 2017 election, and the second is for the June 20, 2017 election. Both show a status of 'Accepted'. A yellow arrow points to the 'Accepted' status in the April column, and another yellow arrow points to the 'Accepted' status in the June column.

Absentee Ballot Status	
Election Date :04/18/2017	Election Date :06/20/2017
Election Name : APRIL 18, 2017 FEDERAL SPECIAL ELECTION	Election Name : JUNE 20, 2017 FEDERAL SPECIAL ELECTION RUNOFF
Election Type : GENERAL	Election Type : GENERAL ELECTION RUNOFF
Absentee App request received : 03/29/2017	Absentee App request received : 05/04/2017
Absentee Ballot issued : 03/29/2017	Absentee Ballot issued : 05/05/2017
Absentee Ballot received : 03/29/2017	Absentee Ballot received :
Status : Accepted	Status :
Reason :	Reason :

Click Here

April Vote Status

June Vote Status

Only 12 fields are required, all are highlighted below.

One additional optional field is available for Seniors who are age 65+. They should check the box to receive AUTOMATIC absentee ballots in future elections.

DeKalb COUNTY or MUNICIPALITY GA Driver's License # DL# or ID#

APPLICATION FOR OFFICIAL ABSENTEE BALLOT

PLEASE PRINT (FAILURE TO FILL OUT THE FORM COMPLETELY COULD DELAY YOUR APPLICATION)
Date of Primary, Election, or Runoff: 10/20/2017

FOR PRIMARY ELECTIONS ONLY (please check one): DEMOCRATIC NON PARTISAN REPUBLICAN

APPLICATION DATE Today	DATE OF BIRTH DOB	DAYTIME CONTACT NUMBER (optional)	EMAIL ADDRESS (required for UOCAVA Voter requesting electronic transmission)
NAME AS REGISTERED LAST FIRST MIDDLE Last First Middle		ADDRESS AS REGISTERED STREET # CITY ZIP CODE Street Address City Zip	

Mail the ballot to my temporary out-of-county address: (or alternate address for physically disabled voter)
STREET CITY STATE ZIP CODE

Note: You must file a separate application for each election for which you are requesting an absentee ballot (*see exceptions below for voters over the age of 65, disabled, or military or overseas citizens). You may file your application up to 180 days prior to the Date of the Election.

* EXCEPTIONS:
If you meet the following criteria, you may choose to complete one application and receive a ballot for the General Primary, General Primary Runoff (if any), General Election

- E - Elderly - I am 65 years of age or older. **> 65yo check to automatically receive absentee for all elections**
- D - Disabled - I have a physical disability.
- U - UOCAVA Voter - Member of armed forces, Health Service or the National Oceanic and Atmospheric Administration, spouse or dependent (including ward or successor-in-law) member, or a United States citizen residing overseas. My current status is (please mark one):
 - MOS - Military Overseas
 - MST - Military Stateside
 - OST - Overseas Temporary Resident
 - OSP - Overseas Permanent Resident (federal offices only)

For UOCAVA Voters Only - I would like to receive my absentee ballots by electronic transmission

Signature
SIGNATURE OR MARK* OF VOTER - REQUIRED *Signature of person preparing application if voter is disabled or illiterate - REQUIRED

You may apply on behalf of another person only in the following circumstances: In the case of a voter residing temporarily out of the county or a physically disabled voter residing within the county, application may be made by mother, father, grandparent, brother, sister, aunt, uncle, spouse, son, daughter, niece, nephew, grandchild, son-in-law, daughter-in-law, mother-in-law, father-in-law, brother-in-law or sister-in-law of the age of 18 or over upon completing the following oath: I, the undersigned do swear (or affirm) that the above-named voter is (check one): residing temporarily out of the county or is a physically disabled voter residing within the county and that the facts included in this application are true.

SIGNATURE AND RELATIONSHIP OF RELATIVE REQUESTING BALLOT - REQUIRED

OFFICE USE ONLY

Voter Registration # _____

DIST. CONDO _____ PRECINCT _____

APPLICATION RECEIVED DATE _____

BALLOT # _____ ISS. DATE _____

CERTIFIED DATE _____ REJECTION DATE _____

ID SHOWN: OADL OTHER _____

Ballot to be: Mailed Electronically Transmitted
 Delivered to voter in hospital by Registrar/Deputy Registrar
 Voted in office (Municipal Only)

FORM #ABS-APP-14

I HEREBY CERTIFY THAT THE ABOVE NAMED VOTER: PACKET PREPARED BY: _____
 IS ELIGIBLE
 IS NOT ELIGIBLE TO RECEIVE AN ABSENTEE BALLOT PACKET RETURNED BY: _____

REASON FOR REJECTION: _____

Registrar Signature _____