# STATE OF IOWA OFFICIAL ABSENTEE BALLOT REQUEST FORM

**YOUR NAME* AND DATE OF BIRTH**

<table>
<thead>
<tr>
<th>Last</th>
<th>Suffix</th>
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<tbody>
<tr>
<td>First</td>
<td>Middle</td>
</tr>
<tr>
<td>Date of Birth (month, day, year)</td>
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**ID NUMBER**

Iowa Driver's License or Non-Operator ID Number: ___________ 
OR Four-digit Voter PIN (can be found on Voter Identification Card): __________ 

Voters without an Iowa Driver's License or Non-Operator ID number are mailed an Iowa Voter Identification Card at the time of registration.

**YOUR IOWA RESIDENTIAL ADDRESS**

Home Street Address (include apt, lot, etc, if applicable) 
City: ___________________________ Zip: ___________ County: ______________________

You must be registered to vote in the county to receive an absentee ballot. If you are registered to vote in the county, this form will be used to update your voter registration if the information provided on this form is different than the information on your registration record.

**WHERE YOUR ABSENTEE BALLOT SHOULD BE MAILED**

Mailing Address/P.O. Box: ___________________________ City: ___________________________ State: ______ Zip: ___________ Country (other than USA): ___________________________

**CONTACT INFO**

<table>
<thead>
<tr>
<th>Contact Information</th>
<th>Email</th>
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<tbody>
<tr>
<td>Phone</td>
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Do not add this contact info to my voter record

**ELECTION DATE OR TYPE**

Election: 03/03/2020 
OR

- [ ] General
- [ ] Primary
- [ ] School
- [ ] City
- [ ] Special: College CSD

**REQUESTER AFFIDAVIT**

I swear or affirm that I am the person named above and I am a registered voter or I am entitled to register at the address listed on this form. I am eligible to receive and vote an absentee ballot for the election indicated above.

Signature: X Date: ______________________

Powers of attorney do not have legal authority to request an absentee ballot on behalf of another.