

PLEASE PRINT LEGIBLY WHERE REQUIRED ON THIS FORM

ABSENTEE BALLOT REQUEST FORM

You **MUST** Submit This Application (in person or by mail) to:

The Elections Office of the Tohono O'odham Nation

Physical Address: BIA Loop #34/Sells, AZ

Mailing Address: P.O. Box 837/Sells, AZ/85634

Telephone Number: 520-383-8709

Pursuant to 12 T.O.C. Chapter 1, Article VIII, Section 1806(F) of the Nation's Elections law, I am an eligible voter and wish to vote by absentee ballot as I have indicated below by checking the box below.

☐ **Automatic Absentee Ballot for all Elections**

(Only check this box if you would like to automatically receive an absentee ballot for all Elections)

Further, I hereby certify that I am a registered voter in the:

_____ community;

the _____ District; and

the Tohono O'odham Nation.

THE FORGOING REQUEST FOR ABSENTEE BALLOTS IS MADE BY:

Signature: _____

Printed Name: _____

Mailing Address: _____

Enrollment#: _____

Contact Number(s): _____

Email: _____

Date of Birth: _____

PLEASE BE ADVISED It is the duty of the voter to maintain a current address with the Board and if necessary, submit a change of address to the Board at least 28 days prior to an election in order to receive automatic absentee ballots.

Art. VIII, Sec. 1806 (F) (1) (a).