

STATE OF MISSOURI

COUNTY OF PHELPS

} ss.

I, John Doe (print name), a registered voter of PHELPS County, declare under the penalties of perjury that I expect to be

prevented from going to the polls on election day due to (check one):

Check one box

- absent on election day from the jurisdiction of the election authority in which I am registered;
incapacity or confinement due to illness or physical disability, including caring for a person who is incapacitated or confined due to illness or disability; (No Notary Required)
religious belief or practice;
employment as an election authority or by an election authority at a location other than my polling place;
incarceration, although I have retained all the necessary qualifications for voting;
certified participation in the address confidentiality program established under Sections 589.660 to 589.681 because of safety concerns.

I hereby state under penalties of perjury that I am qualified to vote at this election; I have not voted and will not vote other than by this ballot at this election. I further state that I marked the enclosed ballot in secret or that I am blind, unable to read or write English, or physically incapable of marking the ballot, and the person of my choosing indicated below marked the ballot at my direction; all of the information on this statement is, to the best of my knowledge and belief, true.

If notary required, sign in presence of notary

John Doe (handwritten signature)

Signature of Voter

Mark box

Mark

Signature of person assisting voter (if applicable)

VOTING ADDRESS

Required! Your physical Phelps county address where you're registered

123 Main Street
Rolla, MO. 65401

MAILING ADDRESS (IF DIFFERENT)

The voter needed assistance in marking the ballot and signing above, because of blindness, other physical disability, or inability to read or to read English. I marked the ballot enclosed in this envelope at the voter's direction, when I was alone with the voter, and I had no other communication with the voter as to how he or she was to vote. The voter swore or affirmed the voter affidavit above and I then signed the voter's name and completed the other voter information above. Signed under the penalties of perjury.

Reason why voter needed assistance:

ASSISTING PERSON SIGN HERE

- 1. (signature of assisting person)
2. (assisting person's name printed)
3. (assisting person's residence)
4. (assisting person's home city or town)

CERTIFICATE

Notary completes this (if required)

Subscribed and sworn to before me, an officer duly authorized under the laws of this State to administer oaths,

this day of , A. D., 20

(SEAL)

(Signature of Notary or other Officer Authorized to Administer Oaths)

(Official Capacity)

My Commission Expires, , 20