PLEASE fill out EACH BLANK completely and return by the Deadline.

ABSENTEE BALLOT REQUEST

I,	, hereby certify that I am or will be an Eligible				
(Print Name)					
Voter of the Absentee Shawnee Tril	be on or before March 21, 2015. I cannot physically				
be present to cast my Vote at the	March 21, 2015 Primary Election, therefore, I am				
requesting an Absentee Ballot be mailed to me at the following address.					

Name (please print):						
	(first)	(middle)	(maiden)		(last)	
Address:			City:	St:	Zip:	
			<i>y</i>		I	
CDIB#:		Date of Birth:				
			Date of D			
~			-			
Signature:		Date:				

All <u>**REQUESTS</u>** must be returned to the <u>Election Commission</u> by the deadline of **March 1, 2015**</u>

Mail to: Absentee Shawnee Election Commission P.O. Box 741 Tecumseh, OK 74873

Fax to: Fax # (405) 273-1337 (Do not fax to any other fax #) Phone: (405) 275-4030 ext. 150 Toll free number 1-800-256-3341 ext.150

Deliver in Person to: Election Commission Office located in the Tribal Court Building

All eligible voters are entitled to vote either at the Polls or by Absentee Ballot. This form may be duplicated for your convenience.

ELECTION COMMISSION USE ONLY

Received:	_Approved:	Disapproved:		
If Disapproved (reason):				
Denial Letter Mailed:	Ballot Mailed:	_Ballot Mailed:		

Election Commission/Representative