

_____ County

Please print and return to the county auditor in the county you are registered. A new application must be completed EACH calendar year.							
You may apply for an absentee ballot before 5:00 p.m. the day before the election for any or all general, primary, municipal, school, or any other elections conducted in this calendar year with one request. Additional information on absentee voting is available at sdsos.gov.							
	Last Name	First Name	-	Middle Name(s)/Initial		Suffix	
1							
	Voter Registration Address		Apt. or Lot #	City, State		Zip Code	
2							
	Absentee ballot mailing address (if	entee ballot mailing address (if different from Se		City, State		Zip Code	
3							
SELECT THE ELECTION(S) YOU ARE REQUESTING AN ABSENTEE BALLOT FOR: If your address changes after this is submitted, you must submit a new form.							
4	 All General Primary Municipal School Any Other You will receive the Primary Election ballot of your party registration, if one is available. If you are registered as an independent/no party affiliation and are requesting a Primary Election ballot, you may have a choice of the following: Democratic Libertarian Non-Political (You can only mark one selection.) 						
	Daytime telephone number If request is for a municipal or school election:						
5							
	I am a full-time student who resided in that jurisdiction prior to leaving. YES NO						
MILITARY AND OVERSEAS CITIZENS ONLY:							
	□ YES □ NO - I am a member of the Uniformed Services or Merchant Marine on active duty						
	□ YES □ NO - I am an eligible spouse or dependent of a member of the Uniformed Services or Merchant Marine on active duty						
	☐ YES ☐ NO - I am a U.S. citizen residing outside the United States If you checked no for all questions, proceed to section #7.						
	If you would like your ballot sent electronically (for Primary and General Elections ONLY) instead of first class mail, provide your e-mail address:						
6							
	E-mail address (MILITARY AND OVERSEAS CITIZENS ONLY):						
	*An overseas military, overseas citizen, or stateside military, a spouse or dependent of the same, voter is not required to submit a photocopy of the voter's ID.						
	*Any military and overseas voter may submit a signed application for absentee ballot by fax or e-mail.						
	An acceptable ID is: A South Dakota driver's license or non-driver ID card, a passport or other picture ID issued by the United States government,						
7	a tribal photo ID, or a current student photo ID issued by a South Dakota high school or postsecondary education institution.						
	Copy of photo identification is attached						
	OR						
	\square I hereby verify that I am the period						
	statements made by me on this application are true and correct.			Voter's Signature (required)			
	Sworn to me before this da	_, 20					
	(Seal) Notary Signature/ Voter's Date of Signing (required)://						
	My commission expires		Month / Day / Year				
AUTHORIZED MESSENGER REQUEST DUE TO SICKNESS OR DISABILITY ONLY: The deadline to request is 3:00 p.m. on Election Day							
	As a registered voter, I authorize						
	Last Name	Fir	st Name		Daytime teleph	one	
	Adduces	0.0	* ~	City, Chata	7:	Cada	
	Address	Ар	t. or Lot #	City, State	Zip	Code	
8							
	to serve as my authorized messenger to pick up my absentee ballot. I			As the authorized messenger, I acknowledge receipt of the ballot for			
	further certify under penalty of law that I am confined because of			the above named voter onDate:Time:			
	sickness or disability and for this reason alone am unable to vote at my			Are you serving as an authorized messanger for any other veter?			
	polling place on Election Day.			Are you serving as an authorized messenger for any other voter?			
						-	
1	Voter's Signature			Authorized Messenger's Signature			