

## **APPLICATION TO VOTE BY MAIL**

Fill out and return this form **OR** you can log on to clerk.wincoil.gov and use the online request.

I attest to:  (Under penalties pursuant to 10 ILCS 5/29-10 of the Election Code):  I am currently a registered voter.  I state that I reside at the address specified in Winnebago County.  I have lived at that address for at least 30 days before the election.		I wa	I want to: (check one)			
		□ Vote by mail for the April 1, 2025, election only.				
		<ul> <li>Vote by mail in all future elections.</li> <li>For primaries, I want a:</li> <li>Democratic Primary ballot</li> <li>Republican Primary ballot</li> </ul>				
						<ul> <li>I am qualifi</li> </ul>
I understand that:						
<ul> <li>I can return my voted ballot in-person</li> <li>OR by mail.</li> </ul>		Send	Send my mail-in-ballot to this mailing address:			
<ul> <li>If I return it in person, it has to go to the Winnebago Clerk's Office by 7 pm on Election Day.         NOT MY POLLING PLACE.     </li> <li>If I return my ballot by mail, it must be post-marked by Election Day.</li> </ul>		(Please Print) Name:				
		Add	Address:			
		City	y:			
Any ballot returned by Election Day must be reviewed by election judges within 14 days for counting.		Sta	te:		Zip:	
		Vote	Voter must sign and date below:			
Voter Registration A	Address:	x			Date	
Address:		Red	uired			
City:			Date of Birth:			
State:	Zip:		ional one:			
		Opt Em	ional ail:			