

Absentee Ballot Request

Carson City Election Office
885 East Musser Street
Suite 1025
Carson City, Nevada 89701

Telephone (775) 887-2087
Facsimile (775) 887-2146

FOR OFFICE USE ONLY			
Office	Mail	Fax	Express Mail
Registration Number			
Precinct			
Ballot Type: Democrat Republican Nonpartisan			

First Name	Middle Initial	Last Name
Carson City Residence Address <i>Where you Live.</i> NOTE: If different from our voter records, your voter registration information will be changed to this address.		
Address to Mail Absentee Ballot (if different from residence address):		
Email Address:		
Day Time Telephone Number:	Date of Birth:	
Please mark election(s) for which you are requesting an absentee ballot:		
<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Special Election		
Please sign and date below:		
_____		_____
Signature		Date

IMPORTANT!

First time voters who did not provide ID at the time of registration must provide ID when they vote.

First time voters who did not provide ID at the time of registration and are requesting an Absentee Ballot must include a copy of current ID along with the request; or, when returning the voted ballot.

Please print and sign this request and return to our office at the above address.
IF YOU HAVE ANY QUESTIONS OR CONCERNS, PLEASE CALL THIS OFFICE