

City of Thorne Bay Absentee Ballot Application
See instructions for application deadlines– APPLY EARLY

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|---|---|-------|--------|--|--|
| 1. | Send ballot(s) for: <input type="checkbox"/> General Municipal Election (October) <input type="checkbox"/> Special Municipal Election To request an absentee ballot for State of Alaska elections, you must apply using the STATE OF ALASKA ABSENTEE APPLICATION. | | | | |
| 2. | You MUST complete this section: <input type="checkbox"/> Yes <input type="checkbox"/> No I am a citizen of the United States. <input type="checkbox"/> Yes <input type="checkbox"/> No I am at least 18 years old or will be within 90 days of completing this application. If you checked NO to either question, do not complete this form as you are not eligible to register to vote. | | | | |
| 3. | Last Name: _____ First Name: _____ Middle Initial: _____ Suffix (Sr., Jr., Etc.): _____ | | | | |
| 4. | Former Name (if your name has changed): _____ *Voter Number (if known): _____ | | | | |
| 5. | Alaska Residence Address Where You Claim Residency – You MUST provide an Alaska residence address. Do not use PO, PSC, HC or RR: <table style="width:100%; border: none;"> <tr> <td style="border: none;">_____</td> <td style="border: none; text-align: right;">ALASKA</td> </tr> <tr> <td style="border: none;">House # Street Name Apt # City State</td> <td style="border: none;"></td> </tr> </table> <input type="checkbox"/> Keep my residence address confidential. Your mailing address in number 6 must be DIFFERENT from your residence address in number 5 to be confidential. | _____ | ALASKA | House # Street Name Apt # City State | |
| _____ | ALASKA | | | | |
| House # Street Name Apt # City State | | | | | |
| 6. | Permanent Mailing Address: _____ If your permanent mailing address is the same as your residence address, write "same as above". _____ | | | | |
| 7. | *Identifiers – You MUST provide at least ONE: SSN or Last 4 of SSN: _____ Alaska Driver's License or State ID Number: _____ <input type="checkbox"/> I have not been issued a SSN or AK driver's license or State ID. | | | | |
| 8. | *Date of Birth – You MUST provide: _____ Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female <div style="font-size: small; margin-left: 20px;"> _____ Month Day Year </div> | | | | |
| 9. | Political Affiliation – For political affiliation choices in Alaska, see instruction Box 9 for options. Write political affiliation: _____ | | | | |
| 10. | Will you be in remote Alaska or overseas (traveling, living or working) and have limited mail service? – <input type="checkbox"/> Check this box to have your primary, general or statewide special election ballot sent beginning 45 days prior to the election. | | | | |
| 11. | Military and Overseas Voter ONLY – Check One: <input type="checkbox"/> I am a member of the Uniformed Services, Merchant Marine, or commissioned corps on active duty or an eligible spouse or dependent. <input type="checkbox"/> I am a U.S. Citizen temporarily residing outside the U.S. or other U.S. citizen residing outside the U.S. Military and Overseas voters ONLY, how do you want your ballot sent? Select one below: <input type="checkbox"/> Mail - Provide ballot mailing address in #13 <input type="checkbox"/> Online Delivery - Provide email address in #14 <input type="checkbox"/> Fax - Provide fax number in #14 | | | | |
| 12. | Thorne Bay Municipal Elections - Ballot Requested for _____ (special or regular) Municipal Election to be held on _____ (date of election). | | | | |
| 13. | Ballot Mailing Address – Ballots will not be forwarded by the USPS. Provide an address where you want your ballot mailed. If you do not provide a ballot mailing address, your ballot will be sent to your permanent mailing address listed above. _____ _____ _____ | | | | |
| 14. | Contact Information: Include State and National Prefix Daytime Phone: _____ Evening Phone: _____ Email Address: _____ Fax Number: _____ | | | | |
| 15. | Voter Certificate. Read and sign: I swear or affirm, under penalty of perjury, that: The information on this form is true, accurate, and complete to the best of my knowledge and I am eligible to vote in the requested jurisdiction, I am not requesting a ballot from any other state, and I am not voting in any other manner in this (these) election(s). I further certify that I am an Alaska resident and that I have not been convicted of a felony, or having been so convicted, have been unconditionally discharged from incarceration, probation and/or parole. I am not registered to vote in another state or I have taken the necessary steps to cancel that registration. WARNING: If you provide false information on this application you can be convicted of a felony and/or misdemeanor. (AS 15.56.040; AS 15.56.050) *Signature _____ Date _____ Your signature must be a handwritten signature. A typed or digital signature is not valid. | | | | |
| Registrar / Agency / Official – Check ID and complete: Name or Agency: _____ Voter No. or SSN _____ | | | | | |

*Items are kept confidential by the City of Thorne Bay and are not available for public inspection.

City of Thorne Bay - Municipal Elections

Absentee Ballot Application Instructions

- Any qualified voter, who expects to be absent from the city or who will be unable to vote by reason of physical disability on the day of any election, may cast an absentee ballot.
- A person who seeks to vote by absentee ballot may file either in person or by mailing his written application to the city clerk.
- An application made by mail must be received by the city clerk, no less than five days before a city election. An application made in person must be filed with the city clerk not earlier than 30 days before the city election date, and no later than the close of business on the day before a city election.
- The application must be signed by the applicant and show his place of residence.
- Nothing in this section is intended to limit the city clerk in personally delivering a ballot to a person who, because of physical incapacity, is unable to make application in person at the city clerk's office for an absent voter's ballot.

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|--|--|--|---|---------------------|--|---|--|
| Box 1 | Indicate elections you wish to participate. | | | | | | |
| Box 2 | If you check no to either question, do not complete this form as you are not eligible to register to vote. | | | | | | |
| Box 3 | Provide your current name (Last, First, Etc.). | | | | | | |
| Box 4 | If you are registered under a different name, provide your former name. Provide your voter number if known. | | | | | | |
| Box 5 | <p>Alaska residence address: Provide a physical residence address in Alaska. Your application will be denied if you do not provide a residence address or you provide a mailing address such as a PO Box, HC Number and Box, PSC Box, Rural Route Number, Commercial Address, Mail Stop Address or an address outside of Alaska. If your residence has been assigned a street name and house number, provide this information or indicate exactly where you live such as, highway name and milepost number, boat harbor with pier and slip number, subdivision name with lot and block, or trailer park name and space number. If you live in rural Alaska, provide the community name as your residence address.</p> <ul style="list-style-type: none"> • If you are temporarily out of state and have intent to return, you may maintain your Alaska residence as it appears on your current record. If you provide a new residence address, it must be within Alaska. Active military members and spouses are exempt from the intent to return requirement. | | | | | | |
| Box 6 | Provide your current permanent mailing address. | | | | | | |
| Box 7 | <p>You must provide either a state issued identification number, Social Security Number or the last four digits of your Social Security Number. If you have never been issued one of the identification numbers, indicate this by checking the appropriate box. When registering to vote, your identity must be verified. To have your identity verified at the time you register, submit a copy of one of the below. If you do not provide proof of identification, you may be required to meet certain identification requirements at the time of voting.</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">• Current and valid photo identification</td> <td style="width: 33%;">• Passport</td> <td style="width: 33%;">• Birth certificate</td> </tr> <tr> <td>• Driver's license</td> <td>• State identification card</td> <td>• Hunting and Fishing license</td> </tr> </table> | • Current and valid photo identification | • Passport | • Birth certificate | • Driver's license | • State identification card | • Hunting and Fishing license |
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| Box 8 | Your date of birth is required. Provide your gender. | | | | | | |
| Box 9 | <p>Write your political affiliation. Recognized political parties are parties who have gained political party status under Alaska Statute. Political groups are parties who have applied for political party status but have not met the qualifications. Alaska political affiliations are as follows:</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Recognized Political Parties:</td> <td style="width: 33%;">Political Groups:</td> <td style="width: 33%;">Other:</td> </tr> <tr> <td> <ul style="list-style-type: none"> • Alaska Democratic Party • Alaska Libertarian Party • Alaska Republican Party • Alaskan Independence Party </td> <td> <ul style="list-style-type: none"> • Alaska Constitution Party • Moderate Party of Alaska • Green Party of Alaska • Patriot's Party of Alaska </td> <td> <ul style="list-style-type: none"> • Progressive Party of Alaska • Twelve Visions Party of Alaska • UCES' Clowns Party • Veterans Party of Alaska • Nonpartisan (not affiliated with a political party or group) • Undeclared (do not wish to declare a political affiliation) </td> </tr> </table> | Recognized Political Parties: | Political Groups: | Other: | <ul style="list-style-type: none"> • Alaska Democratic Party • Alaska Libertarian Party • Alaska Republican Party • Alaskan Independence Party | <ul style="list-style-type: none"> • Alaska Constitution Party • Moderate Party of Alaska • Green Party of Alaska • Patriot's Party of Alaska | <ul style="list-style-type: none"> • Progressive Party of Alaska • Twelve Visions Party of Alaska • UCES' Clowns Party • Veterans Party of Alaska • Nonpartisan (not affiliated with a political party or group) • Undeclared (do not wish to declare a political affiliation) |
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| Box 10 | Check this box if you will be living, working or traveling outside the United States or in a remote area of Alaska with limited mail service. A ballot will be sent beginning 45 days prior to a primary, general or statewide special election (not available for REAA elections). | | | | | | |
| Box 11 | Military and Overseas Voters – Select the option that best describes you. Indicate the method that you would like your ballot delivered. | | | | | | |
| Box 12 | <p>To vote in a primary election, you must select a ballot option. Your political affiliation that you are registered with 30 days before Election Day determines your primary election ballot option. You MUST select a ballot option that corresponds to your political affiliation. If you are registered nonpartisan or undeclared and do not select a ballot option, your application will not be processed for the primary election.</p> <ul style="list-style-type: none"> • Any registered voter may select the Alaska Democratic Party, Alaska Libertarian Party and Alaskan Independence Party candidate and ballot measure(s) ballot. • Only voters registered Republican, Nonpartisan or Undeclared may select the Alaska Republican Party candidate and ballot measure(s) ballot. • Any registered voter may select the ballot measure(s) ONLY ballot. This ballot has ballot measure(s) only and no candidates. | | | | | | |
| Box 13 | Provide your ballot mailing address. Ballots will not be forwarded. Provide an address where you want your ballot mailed. If you do not provide a ballot mailing address, your ballot will be sent to your permanent mailing address. | | | | | | |
| Box 14 | Provide contact information so the clerk can contact you if we need additional information to accept your application. | | | | | | |
| Box 15 | <p>Sign and date. You can mail, email or fax your signed application using the contact information below:</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <p>Mailing Address: City of Thorne Bay City Clerks Office PO Box 19110 Thorne Bay, AK 99919</p> </td> <td style="width: 50%; vertical-align: top;"> <p>Telephone Number: 1-907-828-3380</p> <p>Fax Number: 1-907-828-3374</p> <p>Email Address: cityclerk@thornebay-ak.gov</p> </td> </tr> </table> | <p>Mailing Address: City of Thorne Bay City Clerks Office PO Box 19110 Thorne Bay, AK 99919</p> | <p>Telephone Number: 1-907-828-3380</p> <p>Fax Number: 1-907-828-3374</p> <p>Email Address: cityclerk@thornebay-ak.gov</p> | | | | |
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