

PLEASE PRINT LEGIBLY WHERE REQUIRED ON THIS FORM

ABSENTEE BALLOT REQUEST FORM

You **MUST** Submit This Application (in person or by mail) to:
The Elections Office of the Tohono O’odham Nation
Physical Address: BIA Loop #34/Sells, AZ
Mailing Address: P.O. Box 837/Sells, AZ/85634
Telephone Number: 520-383-8709

Pursuant to 12 T.O.C. Chapter 1, Article VIII, Section 1806(F) of the Nation’s Elections law, I am an eligible voter and wish to vote by absentee ballot as I have indicated below by checking the box below.

Automatic Absentee Ballot for all Elections

(Only check this box if you would like to automatically receive an absentee ballot for all Elections)

Further, I hereby certify that I am a registered voter in the:

_____ community;

the _____ District; and

the Tohono O’odham Nation.

THE FORGOING REQUEST FOR ABSENTEE BALLOTS IS MADE BY:

Signature: _____

Printed Name: _____

Mailing Address: _____

Enrollment#: _____

Contact Number(s): _____

Email: _____

Date of Birth: _____

PLEASE BE ADVISED It is the duty of the voter to maintain a current address with the Board and if necessary, submit a change of address to the Board at least 28 days prior to an election in order to receive automatic absentee ballots.

Art. VIII, Sec. 1806 (F) (1) (a).