

13394 W Trepania Road . Hayward . Wisconsin . 54843 Phone 715-634-8934 . Fax 715-634-4797

ABSENTEE BALLOT REQUEST

I, the undersigned, hereby request an "Abso	entee Ballot" for the upcoming election.
On the date of the election I will not be able to be in attendance at the polling site due to:	
(Only those in a nursing home, hospital, or	other healthcare facility can vote by "Absentee Ballot"
Include address of Medical Facility/Militar	y Base so this can be verified).
PRINTED NAME	MEDICAL FACILITY/MILITARY BASE
MAILING ADDRESS	MAILING ADDRESS
CITY / STATE / ZIP CODE	CITY / STATE / ZIP CODE
SIGNATURE	DATE