**M - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**ID - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Precinct - \_\_\_\_\_\_\_\_\_\_\_**

**(For office use only)**

# APPLICATION FOR ABSENTEE BALLOT

**(Mail)**

STATE OF MISSOURI

COUNTY OF BARRY, ss.

To the Barry County Clerk:

I, (We) **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**,

Husband and Wife may both **PRINT** above (only one application)

The undersigned applicant, do hereby apply for an absentee ballot (ballots) to be voted by me at the **General Municipal Election** to be held on **April 8, 2025.**

**Reason for voting an absentee ballot** (*darken in the oval*):

Absence on Election Day from jurisdiction in which I am registered to vote. *Signature on ballot envelope*

***is*** *required to be notarized.*

Illness or physical disability, including caring for a person who is incapacitated or confined due to illness

or disability. *Signature on* *ballot envelope* ***not*** *required to be notarized.*

\*Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Last Four (4) Digits of Social Security Number: \_\_\_\_\_\_\_\_\_\_\_

\*Party Preference (need ONLY in Primary Election): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Physical Address (Address where you’re registered in Barry Co) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(if different)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Signature of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Relationship to applicant, if signed by a relative)

\*Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Missouri law requires that request for absentee ballot, to be mailed, must be received in the County Clerk’s office by 4:00 p.m. Wednesday, March 26, 2025.**

Mail this completed form to: Joyce Ennis, 700 Main St. Suite 2, Cassville, MO 65625. Fax: 417/847-5311

Forms\Absentee Ballot Applications-color.doc