Montana Secretary of State - **Application for Absentee List**

Fields marked with an asterisk (*) are required fields.

Please type or use black or blue pen only and print clearly. **COMPLETE FORM AND SUBMIT TO COUNTY ELECTION OFFICE**

APPLICANT IDENTIFYING INFORMATION

LAST NAME*

FIRST NAME*

MIDDLE NAME

BIRTHDATE* (MM/DD/YYYY)

APPLICANT ADDRESS AND CONTACT INFORMATION

County where you reside and are registered to vote*

Pondera County

Montana Residence Address*

City*

Zip Code*

Mailing Address (*required if differs from residence address**)

City

State

Zip Code

☐ Check if the mailing address listed above is for part of the year only and if so, complete the information below.

Clearly print the complete mailing address(es) and specify the applicable time periods for each address.

Mailing Address 1	City	State	Zip Code	Period(mm/dd/yyyy-mm/dd/yyyy)

Mailing Address 2	City	State	Zip Code	Period (mm/dd/yyyy –mm/dd/yyyy)

Mailing Address 3	City	State	Zip Code	Period (mm/dd/yyyy-mm/dd/yyyy))

Contact Phone Number

Email Address

Check any that currently apply

☐ Military Domestic (or military spouse or dependent)-check only if on active duty and will be absent from place of registration

☐ Military Overseas (or military spouse or dependent overseas) ☐ U.S. Citizen Overseas

CHECK BELOW TO BE PLACED ON THE ABSENTEE LIST

☐ **Yes,** I request an absentee ballot to be mailed to me for **ALL elections** in which I am eligible to vote as long as I reside at the address listed on this application. I understand that in order to continue to receive an absentee ballot, I must complete, sign, and return a confirmation notice mailed to me by the county election office.

APPLICANT SIGNATURE

By signing below, I understand that I am officially requesting to be placed on the absentee list. I further understand I must complete and return a confirmation notice mailed to me by the county election office.

Signature*_____ Date*_____

Return to:
Election Administrator
Pondera County Clerk & Recorder
20 4th Ave SW
Conrad MT 59425
FAX: 406-271-4070

For Office Use:
Precinct #_____
Ballot #_____
School District #_____