

#12 Envelope: 4.75" x 11"



C: 57%
M: 79%
Y: 35%
K: 15%

PMS 7659
Full Color: 100%
Medium (Clerk or
Deputy Area): 66.66%
Light: 15%

Yellow: 100% Y

Official Absentee Ballot Certificate & Application

CLERK OR DEPUTY >>> Initial Here >>> In-person absentee voter showed valid POI _____ Voter exempt from or met POI requirement _____

STEP 1 CLERK or VOTER must complete this part

Voter Information Election Date (mm/dd/yyyy) _____

City Name:
 Village Name:
 Town Name:

Name (Last, First, Middle) _____

Street Address _____

County _____ City _____

State _____ Zip _____ Ward _____ Ald. Dist _____

STEP 2 VOTER must complete this part

I certify, subject to the penalties for false statements of Wis. Stat. § 12.60(1)(b), that:

- I am a resident of the ward or of the aldermanic district of the municipality in the county of the state of Wisconsin indicated hereon **OR** I am entitled to vote in the ward or aldermanic district at the election indicated hereon
- I am not voting at any other location in this election
- I am unable or unwilling to appear at the polling place in the ward on Election Day, or I have changed my residence within the state from one ward to another less than 28 days before the election
- I displayed the ballot unmarked to the witness and in the presence of no other person marked the ballot and enclosed and sealed it in this envelope in a manner that no one but myself and an assistant under s. 6.87 (5), if I requested assistance, could know how I voted
- I requested this ballot and this is the original or a copy of that request

X


Voter Signature

Certification of Assistant (if applicable)
I certify that the voter is unable to sign their name due to a disability and that I signed the voter's name at the direction and request of the voter

Assistant Signature _____

STEP 3 WITNESS must complete this part

I the undersigned witness, subject to the penalties for false statements of Wis. Stat. § 12.60(1)(b), certify that:


WITNESS REQUIRED

- I am an adult U.S. citizen
- The above statements are true and the voting procedure was executed as stated
- I am not a candidate for any office on the enclosed ballot (except in the case of an incumbent municipal clerk).
- I did not solicit or advise the elector to vote for or against any candidate or measure

X

Witness Signature

Witness Printed Name

Witness Address (Number, Street Name, City)



C: 57%
M: 79%
Y: 35%
K: 15%



Absentee Ballot Return Envelope

Ballot must arrive
by 8 p.m. on
Election Day

EL-122

PMS 7659 100%
Black: 100% K
Gray: 40% K



<<CHIEF ELECTION OFFICIAL>>
 <<SHORT NAME>>
 <<MAILING ADDRESS 1>>
 <<MAILING ADDRESS 2>>

#12 Envelope: 4.75" x 11"

FIRST
CLASS
POSTAGE
REQUIRED



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Light: 15%

Yellow: 100% Y

Solicitud y certificado oficial de voto ausente

CLERK OR DEPUTY >>> Initial Here >>> In-person absentee voter showed valid POI _____ Voter exempt from or met POI requirement _____

PASO 1 SECRETARIO o VOTANTE debe rellenar

Información del Votante Election Date (mm/dd/yyyy) _____

Nombre de ciudad:
 Nombre de aldea:
 Nombre de pueblo:

Nombre (apellido, nombre, segundo nombre) _____

Dirección _____

Condado _____ Ciudad _____

Testado _____ Código postal _____ N° de precinto _____ Distrito _____

PASO 2 EL VOTANTE debe rellenar esta parte

Yo certifico, sujeto a las sanciones de §.12.60(3)(g), Wis. Stats., por declaraciones falsas, que:

- Soy residente del distrito municipal en el condado del estado de Wisconsin indicado aquí tengo derecho a votar en la circunscripción o distrito municipal en las elecciones indicadas aquí
- No voy a votar en ningún otro lugar en estas elecciones
- No puedo o no quiero presentarme en el lugar de votación del distrito el día de las elecciones, o he cambiado mi residencia dentro del estado de un distrito a otro menos de 28 días antes de las elecciones
- He mostrado la papeleta sin marcar al testigo y, en presencia de ninguna otra persona, he marcado la papeleta y la he adjuntado y sellado en este sobre de forma que nadie, excepto yo mismo y un asistente en virtud del artículo 6.87 (5), si he solicitado asistencia, pueda saber cómo he votado
- He solicitado esta papeleta y éste es el original o una copia de dicha solicitud

X _____

Firma del Votante

Certificación del ayudante (si procede)
 Certifico que el votante es incapaz de firmar su nombre debido a una discapacidad y que he firmado el nombre del votante a petición e indicación del votante.

Firma del Ayudante

PASO 3 EL TESTIGO debe rellenar esta parte

Yo, el testigo abajo firmante, sujeto a las sanciones por declaraciones falsas del Wis. Stat. § 12.60(1)(b), certifico que:

TESTIGO REQUERIDO

- Soy ciudadano estadounidense adulto
- Las declaraciones anteriores son verdaderas y el procedimiento de votación se llevó a cabo según lo establecido
- No soy candidato a ningún cargo de la papeleta adjunta (excepto en el caso de un secretario municipal en funciones)
- No solicité ni aconsejé al elector que votara a favor o en contra de ningún candidato o medida

X _____

Firma del Testigo

Nombre y Apellidos del Testigo

Dirección del Testigo (número, calle, ciudad)



C: 57%
M: 79%
Y: 35%
K: 15%



Absentee Ballot Return Envelope

La boleta debe
llegar antes de las
8:00 p.m. el día de las
elecciones

EL-122S

PMS 7659 100%
Black: 100% K
Gray: 40% K



<<CHIEF ELECTION OFFICIAL>>
 <<SHORT NAME>>
 <<MAILING ADDRESS 1>>
 <<MAILING ADDRESS 2>>

FIRST
CLASS
POSTAGE
REQUIRED

#12 Envelope: 4.75" x 11"

#12 Envelope: 4.75" x 11"



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M: 49%
Y: 47%
K: 21%

PMS 316
Full Color: 100%
Medium (Clerk or Deputy Area): 66.66%
Light: 20%

Yellow: 100% Y

Official Absentee Ballot Certificate & Application

CLERK OR DEPUTY Initial Here >>> Voter exempt from or met POI requirement _____ SVD

STEP 1 **CLERK OR VOTER must complete this part**

Voter Information

City Name: Village Name: Town Name:

Name (Last, First, Middle)

Street Address

County City

State Zip Ward Ald. Dist

Election Date (mm/dd/yyyy)

STEP 2 **VOTER must complete this part**

I certify, subject to the penalties for false statements of Wis. Stat. § 12.60(1)(b), that:

- I am a resident of the ward or of the aldermanic district of the municipality in the county of the state of Wisconsin indicated hereon OR I am entitled to vote in the ward or aldermanic district at the election indicated hereon
- I am not voting at any other location in this election
- I am unable or unwilling to appear at the polling place in the ward on Election Day, or I have changed my residence within the state from one ward to another less than 28 days before the election.
- I displayed the ballot unmarked to the witness and in the presence of no other person marked the ballot and enclosed and sealed it in this envelope in a manner that no one but myself and an assistant under s. 6.87 (5), if I requested assistance, could know how I voted.
- I requested this ballot and this is the original or a copy of that request

X

Voter Signature

Certification of Assistant (if applicable)
I certify that the voter is unable to sign their name due to a disability and that I signed the voter's name at the direction and request of the voter

Assistant Signature

STEP 3 **SVD must complete this part**

I the undersigned witness, subject to the penalties for false statements of Wis. Stat. § 12.60(1)(b), certify that:

- I am an adult U.S. citizen
- I am not a candidate for any office on the enclosed ballot (except in the case of an incumbent municipal clerk).
- I did not solicit or advise the elector to vote for or against any candidate or measure.
- I further certify that the name and address of the voter is correct as shown

X X

Deputy #1 Signature **Deputy #2 Signature**

Deputy #1 Printed Name **Deputy #2 Printed Name**

Deputy #1 Address (Number, Street Name, City) **Deputy #2 Address (Number, Street Name, City)**

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PMS 316
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Light: 20%

Yellow: 100% Y

**Absentee
Ballot
Return
Envelope**

For Special Voting
Deputies Only

EL-122SVD



<<CHIEF ELECTION OFFICIAL>>
<<SHORT NAME>>
<<MAILING ADDRESS 1>>
<<MAILING ADDRESS 2>>



#12 Envelope: 4.75" x 11"



C: 35%
M: 68%
Y: 99%
K: 31%

PMS 483
Full Color: 100%
Medium (Clerk or
Deputy Area): 66.66%
Light: 20%

Yellow: 100% Y

Official Absentee Ballot Certificate & Application

CLERK OR DEPUTY Initial Here >>> **Voter exempt from or met POI requirement _____** **MILITARY & OVERSEAS**

STEP 1 CLERK or VOTER must complete this part

Voter Information

City Name: _____
 Village Name: _____
 Town Name: _____

Election Date (mm/dd/yyyy) / /

Name (Last, First, Middle) _____

Street Address _____

County _____ City _____

State _____ Zip _____ Ward _____ Ald. Dist _____

STEP 2 VOTER must complete this part

I certify, subject to the penalties for false statements of Wis. Stat. § 12.60(1)(b), that:

- I am a resident of the ward or of the aldermanic district of the municipality in the county of the state of Wisconsin indicated hereon **OR** I am entitled to vote in the ward or aldermanic district at the election indicated hereon
- I am not voting at any other location in this election
- I am unable or unwilling to appear at the polling place in the ward on Election Day, or I have changed my residence within the state from one ward to another less than 28 days before the election
- I displayed the ballot unmarked to the witness and in the presence of no other person marked the ballot and enclosed and sealed it in this envelope in a manner that no one but myself and an assistant under s. 6.87 (5), if I requested assistance, could know how I voted
- I requested this ballot and this is the original or a copy of that request

X Date of Birth / /
Voter Signature (mm/dd/yyyy)

Certification of Assistant (if applicable)
 I certify that the voter is unable to sign their name due to a disability and that I signed the voter's name at the direction and request of the voter

Assistant signature _____

STEP 3 WITNESS must complete this part

I the undersigned witness, subject to the penalties for false statements of Wis. Stat. § 12.60(1)(b), certify that:

WITNESS REQUIRED

- I am at least 18 years old
- The above statements are true and the voting procedure was executed as stated
- I am not a candidate for any office on the enclosed ballot (except in the case of an incumbent municipal clerk).
- I did not solicit or advise the elector to vote for or against any candidate or measure

X

Witness Signature _____

Witness Printed Name _____

Witness Address (Number, Street Name, City) _____

#12 Envelope: 4.75" x 11"



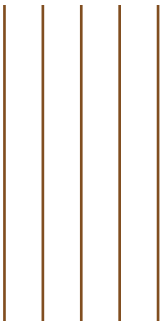
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M: 68%
Y: 99%
K: 31%

PMS 483
Full Color: 100%
Medium (Clerk or Deputy Area): 66.66%
Light: 20%

Yellow: 100% Y

**Absentee
Ballot
Return
Envelope**

Ballot must arrive
by 8 p.m. on
Election Day



OFFICIAL ABSENTEE BALLOTING MATERIAL — FIRST-CLASS MAIL

NO POSTAGE NECESSARY IN THE U. S. MAIL — DMM-703.8.0

<<CHIEF ELECTION OFFICIAL>>
<<SHORT NAME>>
<<MAILING ADDRESS 1>>
<<MAILING ADDRESS 2>>



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USC 3406

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AIRMAIL



C: 35%
M: 68%
Y: 99%
K: 31%



C: 35%
M: 68%
Y: 99%
K: 31%



Blue - PMS 7687: 100%
Red - PMS 485: 100%
Light Red - PMS 485: 40%

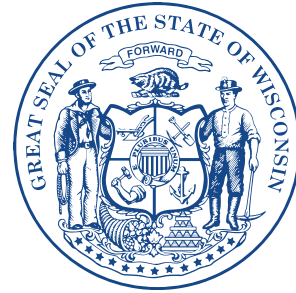


**Official
Absentee
Balloting
Material**

First Class Mail

EL-120

<<CHIEF ELECTION OFFICIAL>>
<<SHORT NAME>>
<<MAILING ADDRESS 1>>
<<MAILING ADDRESS 2>>



FIRST
CLASS
POSTAGE
REQUIRED

Return Service Requested

EL-120, EL-122 Absentee Envelope.indd 1
Blue - PMS 7687: 100%
Red - PMS 485: 100%
Light Red - PMS 485: 40%

#14 Envelope 5" x 11.5"

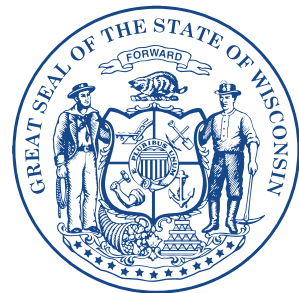
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M: 68%
Y: 99%
K: 31%



Blue - PMS 7687: 100%



Official Absentee Balloting Material





C: 35%
M: 68%
Y: 99%
K: 31%



C: 35%
M: 68%
Y: 99%
K: 31%



Blue - PMS 7687: 100%
Red - PMS 485: 100%
Light Red - PMS 485: 40%

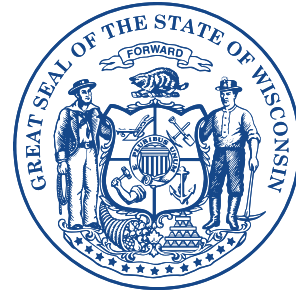


**Official
Absentee
Balloting
Material**

First Class Mail

EL-120M

<<CHIEF ELECTION OFFICIAL>>
<<SHORT NAME>>
<<MAILING ADDRESS 1>>
<<MAILING ADDRESS 2>>



OFFICIAL ABSENTEE BALLOTING MATERIAL — FIRST-CLASS MAIL

NO POSTAGE NECESSARY IN THE U. S. MAIL — DMM-703.8.0

U.S.
POSTAGE
PAID, 39
USC 3406

PAR AVION
AIRMAIL

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Red - PMS 485: 100%
Light Red - PMS 485: 40%

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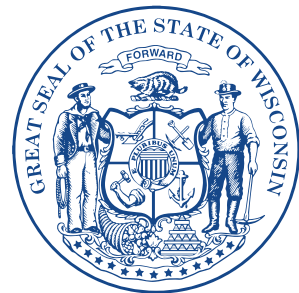
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M: 68%
Y: 99%
K: 31%



Blue - PMS 7687: 100%



Official Absentee Balloting Material

