

AFFIDAVIT FOR VOTE-BY-MAIL BALLOT DELIVERY

(NOTE: All information on this form becomes a public record when submitted to the Supervisor of Elections' Office. Information that is confidential and/or exempt by law is not disclosed.)

I. Designee Information

I hereby swear or affirm that I have been designated by _____ to pick up a
(Print the voter's name)

vote-by-mail ballot on the voter's behalf for this election AND that the voter

Is a member of my immediate family, _____, or
(Relationship to designee)

Is NOT a member of my immediate family, and/or

Is a person with a disability for whom I have been asked to serve as a designee.

_____/_____/_____
Print Name Signature Date (MM/DD/YYYY)

II. Emergency Pick-up (Complete only if pick-up is during mandatory early voting period and up to 7 pm, Election Day)

I, the voter, am unable, or I, the designee, state that the voter is unable, to go to a designated early voting site in the county during the mandatory early voting period or assigned polling place on election day, as may be applicable, for _____, due to the following emergency:
(Specify election)

I understand that any person who willfully affirms falsely to any affirmation in connection with elections and any person who perpetrates any fraud in connection with any vote to be cast in an election violates sections 104.011 and 104.041, Florida Statutes, can be convicted of a felony of the third degree and fined up to \$5,000 and/or imprisoned for up to five years under each of the named statutes. **Under penalties of perjury, I declare that I have read the foregoing affidavit and that the facts stated in it are true.**

_____/_____/_____
Print Name Signature Date (M/DD/YYYY)

Voter's Authorization for Designee for Ballot Delivery

(Complete only voter's written authorization not on file)

I, the voter, designate _____ to pick up my ballot for election _____
(Print designee's name) (Specify election)

_____/_____/_____
Print Name Voter's Signature Date (M/DD/YYYY)

Please provide the following information as may be needed to better identify you as the voter:

Voter's date of birth (MM/DD/YY) or Voter ID Number Voter's address

For Official Use Only

Note: (Check applicable boxes before delivery).

Voter's request for vote-by-mail ballot on file or submitted separately in accordance with s. 101.62(1), Fla. Stat.

Voter provided a photo ID: _____ Designee provided a photo ID: _____.

Designee provided the voter's written authorization, or The voter's written authorization is already on file.

Election official: Name: _____ Signature _____