Vote By Mail Ballot Request

Authorization Categories:

For electronic access to absentee ballot request information, check the applicable authorization category and submit this completed form:

- Canvassing
- An election official
- A political party or official thereof
- A candidate who has filed qualification papers and is opposed in an upcoming election
- Political committee

Requestor’s Name
(First) ____________________________ (Last) ____________________________

Title/Officer __________________________________________________________

Email ____________________________ Committee/Party Name ____________________________

Phone Number ____________________________

Address ____________________________

City ____________________________

State  Zip Code ____________________________

Affirmation

- I affirm that I am a person authorized by Section 101.623(3), Florida Statutes, to acquire Vote By Mail ballot request information


Si desea una traducción de este documento sírvase solicitarlo por correo electrónico a: elections@browardsoe.org.
Oficina: 954-357-7050 • Fax: 954-357-7070