





# SEMINOLE NATION

## VOTER ABSENTEE BALLOT REQUEST FORM

P.O. Box 1623 ♦ Seminole OK 74818-1623 ♦ Phone: (405) 382-2324

**Note: Incomplete forms will not be accepted.**

To be eligible to vote in the Election on August 8, 2009, absentee ballot request forms must be received at the Election Board Office by COB July 20, 2009.

# Absentee Ballot Request

1. Last Name (Print)	First Name (Print)	Middle Name (Print)	Suffix (Jr.,Sr.,etc.)	Phone number: - -
2. Maiden Name (Print)	3. Birth Date Month Day Year	4. Social Security # - -	5. Tribal Band	
6. Mailing address (Street address; Not PO Box)		City	State	Zip Code

### 7. Oath

- I hereby request an ABSENTEE BALLOT for the August 8, 2009, Seminole Nation Election.
- I am an enrolled member of the Seminole Nation and not enrolled as a member of another tribe.

**X** \_\_\_\_\_  
Voter Signature

\_\_\_\_\_  
Date

**Do not sign signature using nicknames or initials. Must sign using full legal name.**

### ENROLLMENT OFFICE USE ONLY

Enrollment verified:  YES  NO Band: \_\_\_\_\_

Verified By: \_\_\_\_\_ Date: \_\_\_\_\_ Name: \_\_\_\_\_

Return this completed form to the Election Board Office at:  
Seminole Nation Election Board  
PO Box 1623  
Seminole, OK 74818-1623