



South Dakota Absentee Ballot Application Form

_____ County

Please print and return to the county auditor in the county you are registered. A new application must be completed EACH calendar year.

You may apply for an absentee ballot before 5:00 p.m. the day before the election for any or all general, primary, municipal, school, or any other elections conducted in this calendar year with one request. Additional information on absentee voting is available at sdsos.gov.

1	Last Name	First Name	Middle Name(s)/Initial	Suffix
2	Voter Registration Address		Apt. or Lot #	City, State
3	Absentee ballot mailing address (if different from Section #2)		City, State	Zip Code

SELECT THE ELECTION(S) YOU ARE REQUESTING AN ABSENTEE BALLOT FOR: If your address changes after this is submitted, you must submit a new form.

4 All General Primary Municipal School Any Other
 You will receive the Primary Election ballot of your party registration, if one is available. If you are registered as an independent/no party affiliation and are requesting a Primary Election ballot, you may have a choice of the following:
 Democratic Libertarian Non-Political **(You can only mark one selection.)**

5 Daytime telephone number _____
If request is for a municipal or school election:
 I have lived in that jurisdiction at least 30 days in the last year. YES NO
 I am a full-time student who resided in that jurisdiction prior to leaving. YES NO

MILITARY AND OVERSEAS CITIZENS ONLY:

6 YES NO - I am a member of the Uniformed Services or Merchant Marine on active duty
 YES NO - I am an eligible spouse or dependent of a member of the Uniformed Services or Merchant Marine on active duty
 YES NO - I am a U.S. citizen residing outside the United States
If you checked no for all questions, proceed to section #7.
 If you would like your ballot sent electronically (for Primary and General Elections ONLY) instead of first class mail, provide your e-mail address:
E-mail address (MILITARY AND OVERSEAS CITIZENS ONLY): _____
 *An overseas military, overseas citizen, or stateside military, a spouse or dependent of the same, voter is not required to submit a photocopy of the voter's ID.
 *Any military and overseas voter may submit a signed application for absentee ballot by fax or e-mail.

7 An acceptable ID is: A South Dakota driver's license or non-driver ID card, a passport or other picture ID issued by the United States government, a tribal photo ID, or a current student photo ID issued by a South Dakota high school or postsecondary education institution.

Copy of photo identification is attached
OR
 I hereby verify that I am the person named above and these statements made by me on this application are true and correct.
 Sworn to me before this _____ day of _____, 20____.
 (Seal)
 Notary Signature _____
 My commission expires _____

Voter's Signature (required) _____
 Voter's Date of Signing (required): ____/____/____
 Month / Day / Year

AUTHORIZED MESSENGER REQUEST DUE TO SICKNESS OR DISABILITY ONLY: The deadline to request is 3:00 p.m. on Election Day

8 As a registered voter, I authorize...

Last Name	First Name	Daytime telephone
Address	Apt. or Lot #	City, State
		Zip Code

...to serve as my authorized messenger to pick up my absentee ballot. I further certify under penalty of law that I am confined because of sickness or disability and for this reason alone am unable to vote at my polling place on Election Day.

As the authorized messenger, I acknowledge receipt of the ballot for the above named voter on...Date: _____ Time: _____
 Are you serving as an authorized messenger for any other voter?
 YES NO

Voter's Signature _____ Authorized Messenger's Signature _____



South Dakota Voter Registration Form

Select County

County

Use this form to: Register to vote or report a name, address, or party change.

Please print. Complete the entire form. Return this form to your county auditor.

The deadline for voter registration is 15 days before any election. Your form must be received by the county auditor by this deadline if you are to vote in the next election. Within 15 days you will receive a notice of your registration. If you do not, contact your county auditor. Any private person or entity registering voters is required to provide you with their contact information. For more information, visit www.sdsos.gov.

Are you a citizen of the United States of America? Yes No
 Will you be 18 years of age on or before the next election? Yes No

If you checked 'No' in response to either of these questions, do not complete this form.

1	Last Name	First Name	Middle Name(s)/Initial	Suffix
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2	Residence Address	Apt. or Lot #	City	State	Zip Code
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3	Mailing Address (if different)	City	State	Zip Code
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3a If Residence Address is a PO Box, rural box, or general delivery, you must give the location of your residence:

4	Date of Birth (Required): Month / Day / Year	5	Telephone Number	6	South Dakota Driver License Number (Required)
7	Choice of Party – See information in the box below:	8	Email Address	If you do not have a current SD Driver License, provide the last 4 digits of Social Security Number	

Choice of Party Information: If you are currently registered to vote and you leave the choice of party field blank, you will remain registered with your current party affiliation. If you are not currently registered to vote and you leave the choice of party field blank, you will be entered as an independent/no party affiliation voter, which is not a political party in South Dakota.

Previous Voter Registration Information Required Below. Use this section to cancel your previous voter registration:

9	Previous Last Name	First Name	Middle Name(s)	Suffix
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10	Previous Address	City	State	Zip Code
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11	Previous Driver License Number and State	Previous County	Date of Birth (Required)
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Would you like to be a precinct election worker on election day? Yes No

12	<p>I declare, under penalty of perjury (2 years imprisonment and \$4,000 fine), that:</p> <ul style="list-style-type: none"> *I am a citizen of the United States of America; *I actually live at and have no present intention of leaving the above address; *I will be 18 on or before the next election; *I have not been judged mentally incompetent; *I am not currently serving a sentence for a felony conviction; and *I authorize cancellation of my previous registration, if applicable. 	<div style="border: 1px solid black; height: 80px; width: 100%;"></div> <p>Signature Required</p> <p>Date: _____ / _____ / _____ Month / Day / Year</p>
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Auditor use only. Agency code: