Application for UOCAVA Fax Ballot

Absent Uniformed and Resident/Nonresident Overseas Electors

Note: This Application shall be filed with the County Clerk and Recorder and submitted no later than the close of business on the Friday preceding the election.

To: (county fill in your address)

I am absent from the state and wish to vote by fax ballot in the following Elections:

- ☐ August 10, 2010 Primary Election
- ☐ November 2, 2010 General Election
- ☐ Next two consecutive General Elections

UOCAVA CITIZEN STATUS *(MUST check one)*

- ☐ Member of Uniformed Services of Merchant Marine on Active Duty, or an Eligible Spouse or Dependant
- ☐ A U.S. Citizen Residing Outside the U.S. Temporarily
- ☐ A U.S. Citizen Residing Outside the U.S. Indefinitely (*Federal Ballot Only)*

VOTER'S FAX NUMBER: You MUST provide the fax number that will be used to fax your ballot from the USA.

	( ) International Prefix	( ) International Country Code	( ) Local Area/Province/ City Code	( ) Local Number
Send my Fax Ballot to:				
Example: *(Geneva, Switzerland)*	(*011*) International Prefix	(*49*) International Country Code	(*30*) Local Area/Province/ City Code	(*124456789*) Local Number

VOTER INFORMATION: Required fields must be completed.

Last Name (Required)	First Name (Required)	Middle Name	Suffix (Jr., III)	Previous Name of Applicant (If Applicable)

Colorado Legal Residence Address (Required)	Apt/Unit #	City/Town (Required)	Zip (Required)	County

Mailing Address or P.O. Box (Required if different from above)	Apt/Unit #	City/Town (Required)	State	Zip (Required)

Date of Birth (Required)	Social Security Number (At Least the Last 4 Digits)	Telephone Number (including area code)
___/___/___ MM DD YYYY		

Email Address _____

Party Affiliation: If you are currently Unaffiliated and wish to vote in a Primary Election, you must declare an affiliation with a political party. Unaffiliated voters may affiliate with a political party up to and including Primary Election Day. If you are currently affiliated with a political party and wish to change your affiliation, you must submit this change request at least 29 days prior to Election Day.

_____ or ☐ Unaffiliated

READ, SIGN AND DATE:

I understand that by voting and returning a faxed ballot, I am voluntarily waiving my right to a secret ballot.

Signature or Mark (Required)	**Witness Signature (Optional)** The Fax Ballot Application must be personally signed by the applicant; or, in case of the applicant's inability to sign, the applicant's mark must be witnessed by another person.
X _____ Signature (Required) Date (Required)	X _____ Witness Signature (Optional) Date

SOS Approved 5/29/08