APPLICATION FOR SECOND SET OF ABSENTEE BALLOTS

	Voter's name			_
	I am registered at: Street or route			
	~ .			
. ·	Date of birth			
	I requested absentee ball	ots for the		_
	Election to be held on	, , , , , , , , , , , , , , , , , , ,	, 20	•
State of				
County of		S.		
I solemnly swear named above. I fu	or affirm that I lost or did not a arther swear or affirm that I wil	receive the absentee b l vote only one set of a	allots I requested bal	uested for the election lots for that election.
Date		Signature of voter)	_
State of	(County of		-
Subscribed and sv	vorn to (or affirmed) before me	this day of		, 20
		My Commission ex	oires	,
		Commission nur	nber	
			Sign	ature of Notary Public