Authorization to Return Absentee Ballot

Instructions

To have your absentee ballot returned by a person other than yourself, you must complete and sign Section 1 of this form. The person you are authorizing to return your ballot(s) must meet the qualifications detailed below and complete and sign Section 2. The authorized returnee must return this form along with your ballot to the county voter registration office. Do not place this form in the envelope containing your ballot.

Authorized Returnee Qualifications

A candidate or a member of a candidate's paid campaign staff including volunteers reimbursed for time expended on campaign activity may not serve as an authorized returnee unless the person is a member of the voter's immediate family (spouse, parent, child, brother, sister, grandparent, grandchild, mother-in-law, father-in-law, brother-in-law, sister-in-law, son-in-law, or daughter-in-law).

| Section 1 | 1 (to be completed by absentee voter) | | | | | | |
|--|---------------------------------------|------------|-------|---------|---------------|-------|---------------------------------|
| Name | | | | | | | |
| Address | | | | | | | |
| City | | | 4 | SC | Zip Code | | |
| Telephone Number | | | | Voter R | egistration N | umber | |
| | | | | | | | |
| I hereby authorizeto return my absentee ballot(| | | | | | | to return my absentee ballot(s) |
| (Name of returnee) | | | | | | | |
| to the County Board of Voter Registration. | | | | | | | |
| Signature of Absentee Voter | | | | | | | |
| Section 2 (to be completed by person returning ballot) | | | | | | | |
| Name | | | | | | | |
| Address | | | | | | | |
| City | | e constant | State | | Zip Code | | |
| Telephone Number | | | | | | | |
| By signing below, I certify that I meet the qualifications to serve as an authorized returnee as detailed above. | | | | | | | |
| Signature of Authorized Returnee | | | | | | | |
| | | | | | | | |

DO NOT PLACE THIS FORM IN THE ENVELOPE CONTAINING YOUR BALLOT.

