Dear Registered Voter:

Missouri Statues now allow election authorities to automatically send *Absentee Applications* to all voters who are permanently disabled. If you consider yourself to be in this classification, please complete the form below, return it to us, and in the future you will automatically be sent an *application* for every election in which you are eligible to vote.

If you have questions concerning this form, please contact the Absentee Department at 816-842-4820 extension 225.

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**KANSAS CITY BOARD OF ELECTION COMMISSIONERS**  
**VERIFICATION OF PERMANENTLY DISABLED VOTER**

State of Missouri  
County of Jackson  
City of Kansas City

I, ________________________________________, declare that I am a resident (please print) and registered voter of Kansas City, Jackson County, Missouri, and am permanently disabled. I hereby request that my name be placed on the Kansas City Election Board’s list of voters qualified to participate as absentee voters pursuant to section 115.284 RSMo and that I am delivered an absentee ballot *application* for each election in which I am eligible to vote.

_____________________________________  __________________
Signature                                                    Date  Birth date

_____________________________________  __________________
Address                                                       Apt.  Last four digits of SS#

______________________________________ Signat ure and address of assisting person:
City                               State                       Zip
