

Dear Registered Voter:

Missouri Statutes 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.

**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#

City

State

Zip

Signature and address
of assisting person:

