

VOTING BY ABSENTEE

Wisconsin is a “no excuse” absentee voting state, meaning you can vote by absentee ballot for any election for any reason, including convenience.

There are two ways to vote an absentee ballot before any election:

1. You can vote “in-person absentee” by casting your ballot at City Hall located at 200 E. Wells Street, Room 501 before the election. In-person absentee voting begins February 2nd and ends at 5:00 p.m. on February 13th (no weekends). Hours are 8:00 a.m. to 4:30 p.m. Monday through Friday.
2. You can vote a “by mail” absentee, where you submit a request for an absentee ballot and a ballot is mailed to you and you vote and mail back your absentee ballot in a postage-paid reply envelope. Requests to receive an absentee ballot by mail must be received by 5:00 p.m. on Thursday, February 12th. Absentee ballots that are postmarked by Election Day and received in the Election Commission office by 4:00 p.m. on the Friday after any election, will be counted if all other absentee ballot requirements are met.

A qualified voter may choose to vote an absentee ballot for:

- One election
- An election cycle (Primary and Election)
- A full calendar year of elections (Spring and Fall election cycle)
- Permanently, if you certify that you are indefinitely confined and unable to leave your home

Qualifications to vote an absentee ballot

*You must be registered to vote at your current address before you can request or receive an absentee ballot. The qualifications to register to vote are as follows:

- You must be a U.S. citizen
- You must be 18 years of age or older on Election Day
- You have lived at your current address for at least 28 consecutive days before the election
- You are not currently serving probation, parole or extended supervision for a felony conviction

*[Confirm your voter registration address online at the My Vote Wisconsin site.](#)

Requesting an Absentee Ballot

There are two options for requesting an absentee ballot

1. Complete the Application for Absentee Ballot
2. Submit a letter or email requesting an absentee ballot that includes the following information:
 - Name
 - Residence Address
 - Date of Birth
 - Requested election date, election cycle or calendar year

NOTE: In order to expedite the mailing of your ballot, you may submit your request by fax at (414) 286-8445 or by [email](mailto:absenteeballot@milwaukee.gov) at absenteeballot@milwaukee.gov

Hospitalized Electors - Please call the Election Commission at 286-3491 for further information.

Central Processing of Absentee Ballots

All absentee ballots are processed at a central location (4300 North Richards Street) rather than the respective voting sites. A voter number is recorded on all absentee ballots during processing.

CITY OF MILWAUKEE APPLICATION FOR ABSENTEE BALLOT
Please return this form to the City of Milwaukee Election Commission
200 East Wells Street, Room 501, Milwaukee, WI 53202
414-286-3491 / FAX 414-286-8445

YOU MUST BE REGISTERED TO VOTE AT YOUR CURRENT CITY OF MILWAUKEE ADDRESS IN ORDER TO RECEIVE AN ABSENTEE BALLOT.

REQUIRED INFORMATION

____ Voter Declaration: I certify that I am a qualified elector, a U. S. Citizen, at least 18 years old, having resided at the below residential address for at least 28 days immediately preceding this election, not currently serving a sentence including probation or parole for a felony conviction, and not otherwise disqualified from voting.

SECTION 1: SELECT REQUESTED ELECTION DATE

____ SPRING Primary, Tuesday, February 17, 2015
____ SPRING Election, Tuesday, April 7, 2015

OR, YOU MAY REQUEST THAT AN ABSENTEE BALLOT BE SENT FOR EVERY ELECTION BY CERTIFYING THE FOLLOWING:

____ I certify that I am indefinitely confined because of age, illness, infirmity or disability and request that an absentee ballot be sent to me for every subsequent election until I am no longer confined or fail to return a ballot for an election.

SECTION 2: VOTER INFORMATION

Last Name _____

First Name _____ Middle Name _____

Date of Birth (MM/DD/YY) _____ Telephone (____) _____

Residence Address _____ Apt. Number _____

CITY OF MILWAUKEE STATE OF WISCONSIN Zip Code _____

If mailing address is different than above address, send ballot to:

Your Name or name of person to send ballot in care of: _____

Nursing Home Name (If Applicable) _____

Mailing Address _____ Apt. Number _____

City _____ State _____ Zip Code _____

 **SIGNATURE:** _____ **DATE:** _____

SECTION 3: MARK IF YOU ARE A _____ MILITARY OR _____ OVERSEAS ELECTOR (INDEFINITELY AWAY)

BALLOT DELIVERY INSTRUCTIONS FOR ACTIVE MILITARY AND OVERSEAS (INDEFINITELY AWAY) VOTERS ONLY

I prefer to receive my absentee ballot by: _____ MAIL _____ FAX _____ EMAIL

FAX NUMBER (with area code): _____ - _____ - _____ EMAIL: _____

(Rev. 12/2/2014) Dist _____ Ward _____ SVRS # _____ Date _____ By _____ Status _____