Dear Voter:

I am pleased to provide you with information about our Application for Ballot by Mail Program. This program is intended to simplify voting for registered voters who wish to receive their ballot by mail and limit the need to print three ballots for each election. This is not a one-time request form, but a program enrollment. You must be a registered voter in Lake County, Illinois to participate. **Enrollment in this program remains in effect until you provide notification to cancel or your voter registration becomes inactive.**

To enroll, please complete the form below including each primary and general election in which you wish to vote. Cut along the dotted line and return the signed form to the Lake County Clerk's office address listed below. Prior to each election, you will receive an application for ballot at the address you provide. **Once our office receives your completed application, a ballot will be mailed to the address provided**. If this card is distributed by a candidate or organization, provide their contact information as well.

During the period for voting by mail, you will be able to go to LakeCountyClerk.info and click on the "Voter Power" link to track the receipt of your voted ballot by the Elections Department. If you have any questions, please e-mail us at VotingByMail@lakecountyil.gov or contact the Elections Department at 847.377.2406.

Very truly yours,

Willard R. Helander

Willard R. Helander
Lake County Clerk

ENROLL FOR AN APPLICATION FOR BALLOT BY MAIL

FOR COUNTY USE ONLY
Application Date:

WILLARD R. HELANDER
Lake County Clerk
18 N. County Street, Room 101
Waukegan, Illinois 60085

847.377.2406
VotingByMail.info

(Print or Type)

VOTER NAME _____ TELEPHONE _____

HOME ADDRESS _____ E-MAIL _____

CITY, STATE, ZIP CODE _____ BIRTH DATE _____

I am a legally registered voter in Lake County, Illinois, eligible to vote, and request an application for ballot prior to each election as indicated below:

Even Years: March Primary Election ☐ Odd Years: February Consolidated Primary ☐ (if applicable)
November General Election ☐ April Consolidated Election ☐

Mailing address for application (if different from registration address):

_____
Number and Street City State Zip Code

DATE _____ VOTER'S SIGNATURE _____

I will notify the Lake County Clerk immediately if my permanent registration address changes.

Organizations or candidates distributing this form must list the name of the organization, your name, address and telephone number:

_____
Organization's name Individual's name Address Telephone

REV 07/2011