10 ILCS 5/19-3, 29-10 SBE No. A-7

APPLICATION FOR VOTE BY MAIL BALLOT

CONSOLIDATED REPUBLICAN PRIMARY ELECTION

Applicant's Name		For Election	Authority's Use Only
Street Address		Precinct:	
City, State, Zip		Voter ID:	
County	KENDALL	For Election Judge's Use Only	
Date of Birth*		Initials	
Phone Number*		IMPORTAL	NT INFORMATION
Email*		BELOW	
To be voted at the	CONSOLIDATED REPUBLICAN PRIMARY ELECTION	_	Y TO ACCEPT IS: uary 23, 2023
Date of Election	FEBRUARY 28, 2023	This election is for Oswego Village Residents ONLY. Voter must reside within	
*Optional information; even though this is not required , providing it may aid in the processing of your ballot.		the Village of C	Oswego and will receive a CAN PARTY BALLOT.

I certify that I reside at the address specified above, in Kendall County, that I have lived at such address for 30 days or more preceding this election, that I am lawfully entitled to vote in such precinct at said election to be held therein, and that I wish to vote by mail ballot.

I hereby make application for an official ballot or ballots to be voted by me at such election, and I agree that I shall return such ballot or ballots to the official issuing the same prior to the closing of the polls on the date of the election or, if returned by mail, postmarked no later than election day, for counting no later than during the period for counting provisional ballots, the last day of which is the 14th day following election day.

I understand that this application is made for an official vote by mail ballot or ballots to be voted by me at the election specified in this application and that I must submit a separate application for an official vote by mail ballot or ballots to be voted by me at any subsequent election.

Under penalties as provided by law pursuant to 10 ILCS 5/29-10, the undersigned certifies that the statements set forth in this application are true and correct.

Signature of Applicant	Today's Date	
Address to which ballot should be mailed: (only if different from above)		

IMPORTANT:

You must return the **completed** and **signed application** to the election authority with jurisdiction over your registration.



Mail to: Debbie Gillette, Kendall County Clerk
ATTN: Voter Registration Office
111 W. Fox St.
Yorkville, IL 60560

