FORM 500 - W

Chicago of Election Commiss

FOR THE RESIDENTS OF CHICAGO **APPLICATION FOR** A VOTE BY MAIL BALLOT

PRIMARY ELECTION JUNE 28, 2022

SAVE TIME. APPLY ONLINE AT chicagoelections.gov or complete this form and return by 5 pm on June 23, 2022 to:

CHICAGO BOARD OF ELECTIONS 69 W. WASHINGTON ST., SUITE 600 P.O. BOX 1179 CHICAGO, IL 60690-1179

PRINT CLEARLY

This form cannot be submitted by fax or email. Note: Voters may apply online.

User

Name		Suffix		Year of Birth	
Address		Apt.		Zip Code	
CHICAGO, ILLINOIS	Phone Number		Email		
	() -				
I want my ballot mailed to my registration address or to address below					
Address		Apt.	Apt.		
City	State or Foreign Coun	State or Foreign Country		Zip Code or Postal Code	

I certify that I reside at the address specified above, 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.

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 Chicago Board of Elections prior to the closing of polls on the date of the election or, if returned by mail, postmarked by 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(s) specified in this application.

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.

X	/ /
Voter signature	Date

Your signature will be compared to and must match your Voter Registration Record. Voter is required to sign above, no other person may sign for a voter.

CHECK ONE

I wish to receive a Vote By Mail ballot in:

the June 28, 2022 Primary Election **ONLY**, and I wish to receive a _____ Party Vote By Mail ballot all future elections that do not require a Party designation (ex. General, Municipal)

all future elections, and I wish to receive a

a Party designation

Party Vote By Mail ballot in elections that require

VRN Pct Wd Code Date

OFFICE USE ONLY