



For Staff Only
Check ID:
Complete: Yes No
Initials:

Absentee & Early Voting Ballot Request

Tribal Member Name: _____

Maiden Name or Other Names used: _____

KIC Tribal Enrollment Number: (if known) _____

Date of Birth: _____ Gender: Male Female

Street Address: _____ City _____ State _____ Zip _____

Mailing Address: _____ City _____ State _____ Zip _____

Home Phone: _____ Cell Phone: _____

Type of Absentee Ballot requesting: Mail In Person

Address Ballot is being mailed to:

Ballots will not be forwarded by the USPS. Please provide an address where you want your ballot to be mailed. If you do not provide an address your ballot will be sent to you mailing address listed above.

Address: _____ City _____ State _____ Zip _____

You must complete this section

- I am a Ketchikan Indian Community Tribal member
- I am at least 18 years old or will be by the date of the Election
- I have a current Mailing Address on file with the Enrollment Office

Before you sign please read:

I swear or affirm, under the penalty of perjury, that: the information on this form is true, accurate, and complete to the best of my knowledge and I am eligible to vote in the Ketchikan Indian Community election, I am not requesting a ballot from and not voting in any other tribe with the exception of Central Council Tlingit and Haida Indian Tribes of Alaska, and I am not voting in any other manner in this election.

Applicant Signature

Date