

ELECTION OFFICE ABSENTEE BALLOT REQUEST FORM

Last Name

First Name

Maiden, Suffix, Alias(es)

Birth Date

Enrollment Number

E-mail Address

Phone Number

MAILING ADDRESS: If the mailing address provided is different than what is currently on file, it will be forwarded to the Membership/CDIB Department so it can be updated.

Street, Route, or PO Box

City

State

Zip

BALLOT SHOULD BE MAILED TO: Same as mailing address above.

Street, Route, or PO Box

City

State

Zip

CHOOSE ONE:

- PERMANENT ABSENTEE VOTER:** I hereby request an absentee ballot for all Osage Nation Elections (*This does not include Minerals Council Elections*).
- VOID PERMANENT ABSENTEE VOTER STATUS:** I hereby request to change my absentee voter status and remove my name from the Permanent Absentee Voter list.
- TEMPORARY ABSENTEE VOTER:** I hereby request an absentee ballot for all Osage Nation Elections for the calendar years **2019** and **2020**. (*This does not void any previous Permanent Absentee Voter status submitted.*)

**If you have questions,
please call
(877) 560-5286.**

Voter Signature

If voter is unable to write, he/she shall make his/her mark above, and same shall be witnessed by two persons who shall sign their names in the space provided.

Witness Signature

Witness Signature

COPY OF PHOTO ID REQUIRED

- ➔ A copy of any government issued photo ID must be sent with this form for your request to be considered complete.
- ➔ EXAMPLES: Driver's License, Passport, Military ID, Tribal Photo ID, etc.
- ➔ We are **NOT** responsible for faxes that do not transmit legibly.

PRIVACY PROGRAM: Please send me information on the Privacy Program.

RETURN THIS FORM BY:

Fax: (918) 287-5292

E-mail: electionoffice@osagenation-nsn.gov

Mail: Osage Nation Election Office

P.O. Box 928

Pawhuska, OK 74056

In Person: NOT a mailing address.

608 Kihekah

Pawhuska, OK

FOR ELECTION OFFICE USE ONLY

INCOMPLETE – NO ID

UNABLE TO PROCESS: _____

DATE COMPLETED: _____