

1 STATE BOARD OF ELECTIONS

2 (Amendment)

3 31 KAR 4:131. Delivery and return of absentee ballots transmitted to covered voters via
4 facsimile or electronically.

5 RELATES TO: KRS 117.085, 117.086, 117A.030, 117A.080, 117A.120, 117A.130, 52
6 U.S.C. 20302

7 STATUTORY AUTHORITY: KRS 117.015(1)(a), KRS 117.079, 117.086(1)(b),
8 117A.030(2), (4)-(6), 117A.130, 52 U.S.C. 20302(e)

9 CERTIFICATION STATEMENT: This is to certify that this administrative regulation
10 complies with the requirements of 2025 RS HB6, Section 8.

11 NECESSITY, FUNCTION, AND CONFORMITY: KRS 117.079 requires the State Board
12 of Elections, as circumstances warrant and with the concurrence of the Attorney General,
13 to promulgate necessary administrative regulations to preserve the absentee voting rights
14 of residents of Kentucky who are covered voters as defined in KRS 117A.010. KRS
15 117.086(1)(b) authorizes the State Board of Elections to promulgate administrative
16 regulations establishing security requirements for the transmission of voted absentee
17 ballots. 52 U.S.C. 20302(e) requires the states to provide not less than one (1) means of
18 electronic communication for use by absent uniformed services voters and overseas

1 voters who wish to register to vote or vote in any jurisdiction in the state to request voter
2 registration applications and absentee ballot applications, for use by the state to send
3 voter registration applications and absentee ballot applications, and for the purpose of
4 providing related voting, balloting, and election information to uniformed services voters
5 and overseas voters. KRS 117A.030(4) requires the State Board of Elections to establish an
6 electronic transmission system through which a covered voter may apply for and receive
7 voter registration materials, military-overseas ballots, and other information authorized
8 under KRS Chapter 117A. KRS 117A.030(5) requires the State Board of Elections to develop
9 standardized absentee-voting materials, including privacy and transmission envelopes
10 and their electronic equivalents, authentication materials, and voting instructions, to be
11 used with the military-overseas ballot of a voter authorized to vote in any jurisdiction in
12 the Commonwealth. KRS 117A.030(6) requires the State Board of Elections to prescribe
13 the form and content of a declaration for use by a covered voter to swear or affirm specific
14 representations pertaining to the voter's identity, eligibility to vote, status as a covered
15 voter, and timely and proper completion of a military-overseas ballot. KRS 117A.130
16 requires the State Board of Elections, in coordination with local election officials, to
17 implement an electronic free-access system by which a covered voter may determine by
18 telephone, electronic mail, or Internet whether the voter's federal postcard application or
19 other registration or military-overseas ballot has been received. KRS 117A.030(2)
20 authorizes the State Board of Elections to promulgate the administrative regulations

1 necessary to implement KRS Chapter 117A. This administrative regulation establishes the
2 procedures for the county clerk to follow when transmitting a military-overseas ballot to
3 a covered voter via facsimile or electronically and for a covered voter to follow when filling
4 out and returning a military-overseas ballot that was transmitted to the covered voter via
5 facsimile or electronically, incorporates by reference standardized absentee-voting
6 materials and a declaration to be used by covered voters, and implements the electronic
7 free-access system pursuant to KRS 117A.130.

8 Section 1. Definitions.

9 (1) "Covered voter" is defined by KRS 117A.010(1).

10 (2) "Federal postcard application" is defined by KRS 117A.010(3).

11 (3) "Instructions to Voter" means the Instructions for Voting to a Covered Voter
12 Who Has Been Faxed or Electronically Transmitted a Military-Overseas Ballot, SBE 46A.

13 (4) "Military-overseas ballot" is defined by KRS 117A.010(5).

14 (5) "Transmission sheet" means the Official Election Materials – Electronic
15 Transmission Cover Sheet prescribed by the Federal Voting Assistance Program.

16 Section 2. Delivering a Military-Overseas Ballot to a Covered Voter Via Facsimile or
17 Electronically.

18 (1) If the county clerk receives a properly completed federal postcard application
19 from a covered voter who is eligible to vote in the jurisdiction and who requests that

balloting materials be transmitted to the covered voter via facsimile or electronically, then for each election in which the covered voter is eligible to vote, the county clerk shall:

(a) Prepare a copy of the military-overseas ballot and mark the original, blank military-overseas ballot, "Faxed to Covered Voter," if the covered voter requested the military-overseas ballot to be transmitted to the covered voter via facsimile, or "Electronically Transmitted to Covered Voter," if the covered voter requested the military-overseas ballot to be transmitted to the covered voter electronically;

(b) Complete the county clerk's portion of the Instructions to Voter;

(c) If the covered voter has requested that the blank absentee ballot be transmitted through the Federal Voting Assistance Program, complete the Transmission Sheet; and

(d) Transmit the copy of the military-overseas ballot, Instructions to Voter, Voter Verification and Declaration, Voter Assistance Form, and Transmission Sheet, if the covered voter has requested that the military-overseas ballot be transmitted through the Federal Voting Assistance Program, to the covered voter via the method requested by the covered voter.

(2) The original blank military-overseas ballot shall be retained and not reused.

(3) A properly completed federal postcard application shall be treated as an application for a military-overseas ballot for all elections held after the date of the application through the next regular election or December 31 of the year of the application, whichever is later, unless the covered voter specifies a shorter time period.

Section 3. Ballot Security Requirements for Returning a Military-Overseas Ballot Transmitted to a Covered Voter Via Facsimile or Electronically. When a covered voter receives a military-overseas ballot via facsimile or electronically:

(1) If the covered voter requires assistance in voting, the covered voter and the person who assists the covered voter shall complete the Voter Assistance Form, except the "Section to be Completed by Precinct Election Officer";

(2) The covered voter shall mark the military-overseas ballot and seal it in an envelope;

(3) The covered voter shall complete and sign the Voter Verification and Declaration;

(4) The covered voter shall place the Voter Verification and Declaration, Voter Assistance Form, if the voter received assistance in voting, and the envelope containing the military-overseas ballot in a separate envelope and seal it;

(5) The covered voter shall print the covered voter's name, voting address, and precinct number on the back of the outer envelope;

(6) The covered voter shall sign across the back flap of the outer envelope;

(7) The covered voter shall print "Absentee Ballot" on the front of the outer envelope, without obstructing the address area; and

(8) The covered voter shall mail the envelope to the county clerk.

Section 4. Electronic Free-Access System. Each county clerk shall either participate in the electronic free-access system established by the State Board of Elections or establish a local electronic free-access system by which a covered voter may determine by telephone, electronic mail, or Internet whether the voter's federal postcard application or other registration or military-overseas ballot application has been received and accepted and whether the voter's military-overseas ballot has been received.

Section 5. Incorporation by Reference.

(1) The following material is incorporated by reference:

(a) "Instructions for Voting to a Covered Voter Who Has Been Faxed or Electronically Transmitted a Military-Overseas Ballot", SBE 46A, 10/2025~~[July 2014]~~;

(b) "Voter Assistance Form", SBE 31, 04/2022;

(c) "Voter Verification and Declaration", SBE 46B, 10/2025~~[July 2014]~~;

(d) "Transmission Cover Sheet", Federal Voting Assistance Program, ~~[2017]~~; and

(e) "Federal Postcard Application", Federal Voting Assistance Program, 01-2023~~[2021]~~.

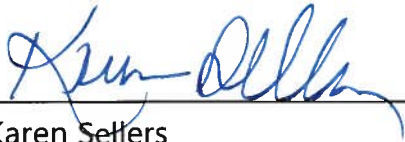
(2) This material may be inspected, copied, or obtained, subject to applicable copyright law, at the State Board of Elections, 140 Walnut Street, Frankfort, Kentucky 40601, Monday through Friday, 8 a.m. to 4:30 p.m.

(3) This material may also be obtained on:

(a) The board's Web site at <https://elect.ky.gov>; or

1

(b) The Federal Voting Assistance Program Web site at <https://fvap.gov>.

A handwritten signature in blue ink, appearing to read "Karen Sellers", written over a horizontal line.

Karen Sellers
Executive Director, State Board of Elections

10/13/25
Date

PUBLIC HEARING AND PUBLIC COMMENT PERIOD

A public hearing on this administrative regulation shall be held on December 22, 2025, at 11:00 a.m. ET, at the Office of the State Board of Elections. Individuals interested in being heard at this hearing shall notify this agency in writing by five (5) workdays prior to the hearing, of their intent to attend. If no notification of intent to attend the hearing was received by that date, the hearing may be cancelled. This hearing will not be made unless a written request for a transcript is made. If you do not wish to be heard at the public hearing, you may submit written comments on the proposed administrative regulation. Written comments shall be accepted until December 31, 2025. Send written notification of intent to be heard at the public hearing or written comments on the proposed administrative regulation to the contact person.

CONTACT PERSON: Taylor Brown, General Counsel, 140 Walnut Street, Frankfort, Kentucky 40601, Phone: (502) 782-9499, Email: TaylorA.Brown@ky.gov.

REGULATORY IMPACT ANALYSIS AND TIERING STATEMENT

31 KAR 4:131

Contact Person: Taylor Brown, phone: 502-782-9499, email: TaylorA.Brown@ky.gov

Subject Headings: Elections and Voting; County Clerks; Local Governments

(1) Provide a brief summary of:

(a) What this administrative regulation does: This administrative regulation establishes the procedures for the county clerk to follow when transmitting a military-overseas ballot to a covered voter via facsimile or electronically and for a covered voter to follow when filling out and returning a military-overseas ballot that was transmitted to the covered voter via facsimile or electronically, incorporates by reference standardized absentee-voting materials and a declaration to be used by covered voters, and implements the electronic free-access system pursuant to KRS 117A.130.

(b) The necessity of this administrative regulation: This administrative regulation is necessary to maintain the maximum degree of correctness, impartiality, and efficiency in the procedures of voting.

(c) How this administrative regulation conforms to the content of the authorizing statutes: KRS 117.015(1)(a) authorizes the State Board of Elections to promulgate administrative regulations necessary to properly carry out its duties.

(d) How this administrative regulation currently assists or will assist in the effective administration of the statutes: This administrative regulation assists in maintaining the maximum degree of correctness, impartiality, and efficiency in the procedures of voting.

(2) If this is an amendment to an existing administrative regulation, provide a brief summary of:

(a) How the amendment will change this existing administrative regulation: This amendment updates Form SBE 46A and Form SBE 46B and incorporates updated federal forms.

(b) The necessity of the amendment to this administrative regulation: This amendment updates Form SBE 46A and Form SBE 46B for the first time since 2014 and incorporates updated federal forms.

(c) How the amendment conforms to the content of the authorizing statutes: KRS 117.015(1)(a) authorizes the State Board of Elections to promulgate administrative regulations necessary to properly carry out its duties.

(d) How the amendment will assist in the effective administration of the statutes: This amendment will assist in maintaining the maximum degree of correctness, impartiality, and efficiency in the procedures of voting.

(3) Does this administrative regulation or amendment implement legislation from the previous five years? This amendment does not implement legislation from the previous five years.

(4) List the type and number of individuals, businesses, organizations, or state and local governments affected by this administrative regulation:

This administrative regulation will affect voters of the Commonwealth, covered voters as defined by KRS 117A.010(1), county boards of election, and the State Board of Elections.

(5) Provide an analysis of how the entities identified in question (4) will be impacted by either the implementation of this administrative regulation, if new, or by the change, if it is an amendment, including:

(a) List the actions that each of the regulated entities identified in question (4) will have to take to comply with this administrative regulation or amendment. To comply with this amendment, the State Board of Elections and county boards of election will need to make available the required items, while covered voters will need to take the described steps to receive and return a ballot.

(b) In complying with this administrative regulation or amendment, how much will it cost each of the entities identified in question (4): The State Board of Elections estimates that the implementation of this administrative regulation will have minimal costs.

(c) As a result of compliance, what benefits will accrue to the entities identified in question (4): Compliance with this new administrative regulation will benefit all by assisting in maintaining the maximum degree of correctness, impartiality, and efficiency in the procedures of voting.

(6) Provide an estimate of how much it will cost the administrative body to implement this administrative regulation:

(a) Initially: The cost of the implementation of this administrative regulation for the State Board of Elections will be minimal.

(b) On a continuing basis: The continuing costs of this administrative regulation for the State Board of Elections will be minimal.

(7) What is the source of the funding to be used for the implementation and enforcement of this administrative regulation: Funds from the State Board of Elections' administrative budget will be used in the implementation and enforcement of this administrative regulation.

(8) Provide an assessment of whether an increase in fees or funding will be necessary to implement this administrative regulation, if new, or by the change if it is an amendment: Implementation of this administrative regulation can be achieved without an increase in fees or funding by the General Assembly.

(9) State whether or not this administrative regulation established any fees or directly or indirectly increased any fees: No fees are associated with this administrative regulation.

(10) TIERING: Is tiering applied? Explain why or why not. Tiering is not used in this administrative regulation, as a desired result of the promulgation of this administrative regulation is uniform procedures for the administration of elections throughout all of the counties in the Commonwealth.

FISCAL IMPACT STATEMENT

31 KAR 4:131

Contact Person: Taylor Brown, phone: 502-782-9499, email: TaylorA.Brown@ky.gov

(1) Identify each state statute, federal statute, or federal regulation that requires or authorizes the action taken by the administrative regulation. KRS 117.015(1)(a), KRS 117.079, KRS 117.086(1), 52 U.S.C. 20302(e), and KRS 117A.130 require and authorize the actions taken by this administrative regulation.

(2) State whether this administrative regulation is expressly authorized by an act of the General Assembly, and if so, identify the act: This administrative regulation is expressly authorized by the creation of KRS 117.015(a), 2005 Ky. Acts ch. 91, sec. 2.

(3)(a) Identify the promulgating agency and any other affected state units, parts, or divisions: This administrative regulation will affect the promulgating agency, the State Board of Elections.

(b) Estimate the following for each affected state unit, part, or division identified in (3)(a):

1. Expenditures:

For the first year: The State Board of Elections expects that this administrative regulation amendment will cost no more to administer than is currently expended.

For subsequent years: The State Board of Elections expects that this administrative regulation amendment will cost no more to administer than is currently expended.

2. Revenues:

For the first year: It is not expected or intended that this administrative regulation will generate any revenue.

For subsequent years: It is not expected or intended that this administrative regulation will generate any revenue.

3. Cost Savings:

For the first year: The State Board of Elections expects that this administrative regulation will not generate any specific cost savings.

For subsequent years: The State Board of Elections expects that this administrative regulation will not generate any specific cost savings.

(4)(a) Identify affected local entities (for example: cities, counties, fire departments, school districts): This administrative regulation will affect county boards of election.

(b) Estimate the following for the first year:

1. Expenditures:

For the first year: The State Board of Elections expects that this administrative regulation amendment will cost no more to administer than is currently expended.

For subsequent years: The State Board of Elections expects that this administrative regulation amendment will cost no more to administer than is currently expended.

2. Revenues:

For the first year: It is not expected or intended that this administrative regulation will generate any revenue.

For subsequent years: It is not expected or intended that this administrative regulation will generate any revenue.

3. Cost Savings:

For the first year: The State Board of Elections expects that this administrative regulation will not generate any specific cost savings for the regulated entities.

For subsequent years: The State Board of Elections expects that this administrative regulation will not generate any specific cost savings for the regulated entities.

(5)(a) Identify any affected regulated entities not listed in (3)(a) or (4)(a): This administrative regulation will affect voters of the Commonwealth and covered voters as defined by KRS 117A.010(1).

(b) Estimate the following for each regulated entity identified in (5)(a):

1. Expenditures:

For the first year: The State Board of Elections expects that this administrative regulation amendment will cost no more to administer than is currently expended.

For subsequent years: The State Board of Elections expects that this administrative regulation amendment will cost no more to administer than is currently expended.

2. Revenues:

For the first year: It is not expected or intended that this administrative regulation will generate any revenue.

For subsequent years: It is not expected or intended that this administrative regulation will generate any revenue.

3. Cost Savings:

For the first year: The State Board of Elections expects that this administrative regulation will not generate any specific cost savings for the regulated entities.

For subsequent years: The State Board of Elections expects that this administrative regulation will not generate any specific cost savings for the regulated entities.

(6) Provide a narrative to explain the following for each entity identified in (3)(a), (4)(a), and (5)(a):

(a) Fiscal impact of this administrative regulation: The State Board of Elections expects that this administrative regulation will have little to no fiscal impact on the regulated entities, outside those expenditures already undertaken.

(b) Methodology and resources used to determine the fiscal impact: This determination of this administrative regulation's fiscal impact is made by the listed contact person and other agency staff based on their collective experience with the subject matter.

(7) Explain, as it relates to the entities identified in (3)(a), (4)(a), and (5)(a):

(a) Whether this administrative regulation will have a "major economic impact", as defined by KRS 13A.010(14): The State Board of Elections does not expect that this administrative regulation will result in a "major economic impact" as the combined implementation and compliance costs of an administrative regulation are not expected to rise to at least five hundred thousand dollars (\$500,000) over any two (2) year period.

(b) The methodology and resources used to reach this conclusion: This conclusion is made by the listed contact person and other agency staff based on their collective experience with the subject matter.

SUMMARY OF MATERIAL INCORPORATED BY REFERENCE

The "Instructions for Voting to a Covered Voter Who Has Been Faxed or Electronically Transmitted a Military-Overseas Ballot", Form SBE 46A, 10/2025, is the 1-page form provides instructions for voting a military-overseas ballot to a covered voter who has been faxed or electronically transmitted such.

The "Voter Assistance Form", Form SBE 31, 04/2022 is the 1-page form that allows voters requiring assistance to make and sign the oath required under KRS 117.225(2).

The "Voter Verification and Declaration", Form SBE 46B, rev. 10/2025, is the 1-page form that allows covered voters to verify and attest to their eligibility for a military-overseas ballot.

The "Transmission Cover Sheet", Federal Voting Assistance Program, is the 1-page form that serves as a cover sheet for an emailed or faxed transmission of voting materials.

The "Federal Postcard Application", Federal Voting Assistance Program, 01-2023, is the 2-page form that a covered voter may use to register to vote and to request an absentee ballot.

SUMMARY OF CHANGES TO MATERIAL INCORPORATED BY REFERENCE

The "Instructions for Voting to a Covered Voter Who Has Been Faxed or Electronically Transmitted a Military-Overseas Ballot", Form SBE 46A, 10/2025, is the 1-page form provides instructions for voting a military-overseas ballot to a covered voter who has been faxed or electronically transmitted such. The form was amended to update the listed as the previous version of the form was promulgated in 2014.

The "Voter Verification and Declaration", Form SBE 46B, 10/2025, is the 1-page form that allows covered voters to verify and attest to their eligibility for a military-overseas ballot.

The "Transmission Cover Sheet", Federal Voting Assistance Program, is the 1-page form that serves as a cover sheet for an emailed or faxed transmission of voting materials. The incorporated form is the most current form proved by the Federal Voting Assistance Program and appears to have no changes from the previous version.

The "Federal Postcard Application", Federal Voting Assistance Program, 01-2023, is the 2-page form that a covered voter may use to register to vote and to request an absentee ballot. The incorporated form is the most current form proved by the Federal Voting Assistance Program and appears to have no changes from the previous version.

Instructions for Voting To a Covered Voter Who Has Been Faxed or Electronically Transmitted a Military-Overseas Ballot

Materials needed:

- * Blank military-overseas ballot
- * 2 envelopes (can print at www.elect.ky.gov)
- * Voter Verification and Declaration
- * Sufficient Postage
- * Voter Assistance Form (if you need assistance)

STEP 1: If you need assistance voting, complete the Voter Assistance Form:

- > The person who is assisting you must complete the "Oath for Person Assisting Voter." Neither your employer, an agent of your employer, nor an officer nor agent of your labor union may assist you in voting.
- > If you are not certified as needing assistance to vote on a permanent basis but need assistance to vote due to blindness, other physical disability, or inability to read English, you must complete the "Oath for Voter Not Certified as Requiring Assistance on a Permanent Basis."
- > You are not required to complete the "Section to Completed by Precinct Election Officer."

STEP 2: Complete the Absentee Ballot.

- > Complete your ballot in private. Do not allow anyone to observe you marking your ballot, unless you have been certified as needing assistance to vote on a permanent basis or need assistance to vote due to blindness, other physical disability, or inability to read English. Vote for only one candidate per race unless ballot instructions indicate otherwise. Voting for more than the allowed number will result in an over vote, and your vote in that race will not be counted.
- > If a mistake is made with a pencil, please erase the mistake completely, and correct the mistake.
- > If a mistake is made with a pen, please circle the name of the candidate you wish to select.
- > When you are finished marking your ballot, double check it for accuracy.

STEP 3: Place the voted ballot in one of the envelopes (the "inner envelope") and seal it.

STEP 4: Complete and sign the Voter Verification and Declaration.

- > Your ballot will not be counted if you do not complete, date, and sign this form.

STEP 5: Place the inner envelope, Voter Verification and Declaration, and if you received assistance to vote, the Voter Assistance Form in the second envelope (the "outer envelope") and seal it.

STEP 6: On the back of the outer envelope:

- > Print your name, voting address, and precinct number exactly as they appear below.
- > Sign your name across the flap.

STEP 7: On the front of the outer envelope:

- > Print the address of your county clerk as listed below.
- > Print "Absentee Ballot," without obstructing the county clerk's address.
- > Affix sufficient postage.

STEP 8: Mail the Envelopes to the County Clerk

- > The absentee ballot must be delivered by mail and received by the county clerk by **6:00 p.m. local time on the day of the election** in order to be counted. Kentucky law prohibits a county clerk from accepting a completed ballot by fax or electronic transmission. It must be mailed.

YOU MUST COMPLETE THE VOTER VERIFICATION AND DECLARATION, SIGN THE OUTER ENVELOPE, AND SEAL BOTH ENVELOPES FOR YOUR BALLOT TO BE COUNTED.

To be completed by the County Clerk for the use of the voter

Voter Name		Clerk Name	
Voter Address		Clerk Address	
Voter Precinct		Clerk Phone #	

Instructions for Voting To a Covered Voter Who Has Been Faxed or Electronically Transmitted a Military-Overseas Ballot

Materials needed: * Blank military-overseas ballot * 2 envelopes (can print at www.elect.ky.gov)
 * Voter Verification and Declaration * Sufficient Postage
 * Voter Assistance Form (if you need assistance)

STEP 1: If you need assistance voting, complete the Voter Assistance Form:

- The person who is assisting you must complete the "Oath for Person Assisting Voter." Neither your employer, an agent of your employer, nor an officer nor agent of your labor union may assist you in voting.
- If you are not certified as needing assistance to vote on a permanent basis but need assistance to vote due to blindness, other physical disability, or inability to read English, you must complete the "Oath for Voter Not Certified as Requiring Assistance on a Permanent Basis."
- You are not required to complete the "Section to Completed by Precinct Election Officer."

STEP 2: Complete the Absentee Ballot.

- Complete your ballot in private. Do not allow anyone to observe you marking your ballot, unless you have been certified as needing assistance to vote on a permanent basis or need assistance to vote due to blindness, other physical disability, or inability to read English. Vote for only one candidate per race unless ballot instructions indicate otherwise. Voting for more than the allowed number will result in an over vote, and your vote in that race will not be counted.
- If a mistake is made with a pencil, please erase the mistake completely, and correct the mistake.
- If a mistake is made with a pen, please circle the name of the candidate you wish to select.
- When you are finished marking your ballot, double check it for accuracy.

STEP 3: Place the voted ballot in one of the envelopes (the "inner envelope") and seal it.

STEP 4: Complete and sign the Voter Verification and Declaration.

- Your ballot will not be counted if you do not complete, date, and sign this form.

STEP 5: Place the inner envelope, Voter Verification and Declaration, and if you received assistance to vote, the Voter Assistance Form in the second envelope (the "outer envelope") and seal it.

STEP 6: On the back of the outer envelope:

- Print your name, voting address, and precinct number exactly as they appear below.
- Sign your name across the flap.

STEP 7: On the front of the outer envelope:

- Print the address of your county clerk as listed below.
- Print "Absentee Ballot," without obstructing the county clerk's address.
- Affix sufficient postage.

STEP 8: Mail the Envelopes to the County Clerk

- The absentee ballot must be delivered by mail and received by the county clerk by **6:00 p.m. local time on the day of the election** in order to be counted. Kentucky law prohibits a county clerk from accepting a completed ballot by fax or electronic transmission. It must be mailed.

YOU MUST COMPLETE THE VOTER VERIFICATION AND DECLARATION, SIGN THE OUTER ENVELOPE, AND SEAL BOTH ENVELOPES FOR YOUR BALLOT TO BE COUNTED.

To be completed by the County Clerk for the use of the voter

Voter Name		Clerk Name	
Voter Address		Clerk Address	
Voter Precinct		Clerk Phone #	

VOTER ASSISTANCE FORM

NOTE: A voter requiring assistance may be assisted by the two precinct judges or a person of the voter's choice who is not an election officer, except that the voter's employer, an agent of that employer, or an officer or agent of the voter's union shall not assist a voter.

NAME OF VOTER	DATE OF BIRTH (MM/DD/YYYY)	
RESIDENTIAL ADDRESS		
	Complete Street Address	City Zip Code
PRECINCT NAME OR PRECINCT NUMBER		
Check ☒ one:		
☐	Voter has been certified as requiring assistance on a permanent basis as indicated on precinct roster. The following oath must be signed <i>by the person assisting the voter</i> and be witnessed by the precinct clerk/officer.	
☐	Voter is NOT certified as requiring assistance on a permanent basis. <i>Both</i> of the following oaths must be completed and signed by the voter, the person assisting the voter, and be witnessed by the precinct clerk/officer.	

OATH FOR VOTER NOT CERTIFIED AS REQUIRING ASSISTANCE ON A PERMANENT BASIS

(Voter certified as requiring assistance on a permanent basis as indicated on precinct roster need not sign this oath section.)

I hereby state, under oath (or affirmation), that I am a qualified voter in the precinct indicated above, and that the reason I require assistance in voting is (check one): ☐ Blindness ☐ Physical disability ☐ Inability to read English

Signature or "mark" of voter

Witness (two witnesses required if "mark" is used)

Witness (two witnesses required if "mark" is used)

OATH FOR PERSON ASSISTING VOTER

**(THIS PORTION MUST BE COMPLETED BY THE PERSON ASSISTING THE VOTER
BEFORE ANY VOTER CAN RECEIVE ASSISTANCE)**

I hereby state, under oath (or affirmation), that I will operate the voting machine in accordance with the directions of the voter requiring assistance. I further state that I am not the voter's employer, an agent of that employer, or an officer or agent of that voter's union.

Name of person assisting voter (PLEASE PRINT)	Signature of person assisting voter

APPLICATION REQUEST FOR PERMANENT ASSISTANCE

Voter who requires assistance on a permanent basis due to ☐ Blindness (or) ☐ Physical disability hereby applies for certification for permanent assistance.

SECTION TO BE COMPLETED BY PRECINCT ELECTION OFFICER

The parties hereto have subscribed and sworn (or affirmed) these Oaths before me this _____ day of _____, 20_____.

Signature of Precinct Election Officer

KRS 116.165	Provides that "any person who falsely signs and verifies any form requiring verification shall be guilty of perjury and subject to penalties therefor."		
KRS 117.255			
KRS 117.365			
KRS 117.995			
	WHITE:	Grand Jury	
	CANARY:	County Clerk	
SBE 31 (04/2022)	PINK:	County Board of Elections	

VOTER VERIFICATION AND DECLARATION

You must complete, date and sign the Voter Verification and Declaration AND sign the back of your outer envelope for your ballot to be counted.

If you receive assistance in voting, then you and the person rendering assistance must also complete and return the Voter Assistance Form.

Name: _____
Last First Middle Suffix

Identification: _____ - _____ - _____ / ____ / ____
Social Security Number Birthdate (MM/DD/YYYY)

Classification: ☐ I am a member of the Uniformed Services or Merchant Marine on active duty OR an eligible spouse or dependent.
☐ I am an activated National Guard member on State orders OR an eligible spouse or dependent.
☐ I am a U.S. citizen residing outside the United States, and I intend to return.
☐ I am a U.S. citizen residing outside the United States, and my return is not certain.
☐ I am a U.S. citizen and have never resided in the United States.

Voting Residence Address:

Street Address Apt. # City/Town/Village County State Zip Code

I swear or affirm, under penalty of perjury, that:

- The information on this form is true, accurate, and complete to the best of my knowledge. I understand that a material misstatement of fact in completion of this document may constitute grounds for conviction of perjury under the laws of the United States of the Commonwealth of Kentucky.
- I am a U.S. citizen, at least 18 years of age (or will be by the day of the election), eligible to vote in this jurisdiction, and
- I am not disqualified to vote due to having been convicted of a felony or other disqualifying offense, nor have I been adjudicated mentally incompetent; or if so, my voting rights have been reinstated; and
- I am not registering, requesting a ballot, or voting in any other jurisdiction in the United States, except this jurisdiction.
- In voting, I have marked and sealed this ballot in private and have not allowed any person to observe the marking of this ballot, except those authorized to assist voters under State and Federal law.

Signature **X** _____ Today's Date: _____

VOTER VERIFICATION AND DECLARATION

You must complete, date and sign the Voter Verification and Declaration AND sign the back of your outer envelope for your ballot to be counted.

If you receive assistance in voting, then you and the person rendering assistance must also complete and return the Voter Assistance Form.

Name: _____
Last First Middle Suffix

Identification: _____
Social Security Number Birthdate (MM/DD/YYYY)

Classification: ☐ I am a member of the Uniformed Services or Merchant Marine on active duty OR an eligible spouse or dependent.
☐ I am an activated National Guard member on State orders OR an eligible spouse or dependent.
☐ I am a U.S. citizen residing outside the United States, and I intend to return.
☐ I am a U.S. citizen residing outside the United States, and my return is not certain.
☐ I am a U.S. citizen and have never resided in the United States.

Voting Residence Address:

Street Address Apt. # City/Town/Village County State Zip Code

I swear or affirm, under penalty of perjury, that:

- The information on this form is true, accurate, and complete to the best of my knowledge. I understand that a material misstatement of fact in completion of this document may constitute grounds for conviction of perjury under the laws of the United States of the Commonwealth of Kentucky.
- I am a U.S. citizen, at least 18 years of age (or will be by the day of the election), eligible to vote in this jurisdiction, and
- I am not disqualified to vote due to having been convicted of a felony or other disqualifying offense, nor have I been adjudicated mentally incompetent; or if so, my voting rights have been reinstated; and
- I am not registering, requesting a ballot, or voting in any other jurisdiction in the United States, except this jurisdiction.
- In voting, I have marked and sealed this ballot in private and have not allowed any person to observe the marking of this ballot, except those authorized to assist voters under State and Federal law.

Signature X _____ Today's Date: _____



Transmission Cover Sheet

To:	
City/County Board of Elections	
Fax Number	
City	
State	

From:	
Last Name	
First Name	
Middle Name	
Telephone Number	
Fax Number	
Email Address	

Additional Information:

If a <u>VOTED BALLOT</u> is being faxed or emailed, sign below: "I understand that by faxing or emailing my voted ballot I am voluntarily waiving my right to a secret ballot"	
Signature: _____	Date: _____

Number of pages being transmitted, including this sheet: _____

Not all forms can be sent electronically. Please check the FVAP.gov website or the [Voting Assistance Guide](#) to verify which forms can be sent electronically to your Election Official.

Email: If your forms can be emailed, email them directly to your election official.
Email addresses for your election official can be found at:
<https://www.fvap.gov/search-offices>.

Fax: Send directly to your Election Official.
Fax numbers for your election official can be found at:
<https://www.fvap.gov/search-offices>.

Voter Registration and Absentee Ballot Request

Federal Post Card Application (FPCA)

Print clearly in blue or black ink, please see back for instructions.

This form is for absent Uniformed Service members, their families, and citizens residing outside the United States. It is used to register to vote, request an absentee ballot, and update your contact information. See your state's guidelines at [FVAP.gov](https://www.fvap.gov).

1. Who are you? Pick one.

I request an absentee ballot for all elections in which I am eligible to vote AND: ☐ I am on active duty in the Uniformed Services or Merchant Marine -OR- ☐ I am an eligible spouse or dependent. ☐ I am a U.S. citizen living outside the country, and I intend to return. ☐ I am a U.S. citizen living outside the country, and my intent to return is uncertain. ☐ I am a U.S. citizen living outside the country, I have never lived in the United States.

Last name

Suffix (Jr., II)

☐ Mr. ☐ Miss
☐ Mrs. ☐ Ms.

First name

Previous names (if applicable)

Middle name

Birth date (MM/DD/YYYY)

Social Security Number

Driver's license or State ID#

2. What is your address in the U.S. state or territory where you are registering to vote and requesting an absentee ballot?

Your voting materials will not be sent to this address. See instructions on the other side of form.

Street address

Apt #

City, town, village

State

County

ZIP

3. Where are you now? You MUST give your CURRENT address to receive your voting materials.

Your mailing address. (Different from above)

Your mail forwarding address. (If different from mailing address)

4. What is your contact information? This is so election officials can reach you about your request.

Provide the country code and area code with your phone and fax number. Do not use a Defense Switched Network (DSN) number.

Email:

Phone:

Alternate email:

Fax:

5. What are your preferences for upcoming elections?

A. How do you want to receive voting materials from your election office? (Select One) ☐ Mail ☐ Email or online ☐ Fax

B. What is your political party for primary elections?

6. What additional information must you provide?

Puerto Rico and Vermont require more information, see back for instructions. *Additional state guidelines* may be found at [FVAP.gov](https://www.fvap.gov). You may also use this space to clarify your voter information.

7. You must read and sign this statement.

I swear or affirm, under penalty of perjury, that:

- The information on this form is true, accurate, and complete to the best of my knowledge. I understand that a material misstatement of fact in completion of this document may constitute grounds for conviction of perjury.
- I am a U.S. citizen, at least 18 years of age (or will be by the day of the election), eligible to vote in the requested jurisdiction, and
- I am not disqualified to vote due to having been convicted of a felony or other disqualifying offense, nor have I been adjudicated mentally incompetent; or if so, my voting rights have been reinstated; and
- I am not registering, requesting a ballot, or voting in any other jurisdiction in the United States, except the jurisdiction cited in this voting form.

Sign here

X

Today's date
(MM/DD/YYYY)

You can vote wherever you are.

1. Fill out your form completely and accurately.

- Your U.S. address is used to determine where you are eligible to vote absentee. For military voters, it is usually your last address in your state of legal residence. For overseas citizens, it is usually the last place you lived before moving overseas. You do not need to have any current ties with this address. DO NOT write a PO Box # in section 2.
- Most states allow you to provide a Driver's License number or the last 4 digits of your SSN. New Mexico, Tennessee, and Virginia require a full SSN.
- If you cannot receive mail at your current mailing address, please specify a mail forwarding address.
- Many states require you to specify a political party to vote in primary elections. This information may be used to register you with a party.
- **Section 6 Requirements:** If your voting residence is Vermont, you must acknowledge the following by writing in section 6: "I swear or affirm that I have taken the Vermont Voter's Oath." If your voting residence is in Puerto Rico, you must list your mother's and father's first name.
- We recommend that you complete and submit this form every year while you are an absentee voter.

2. Remember to sign this form!

3. Return this form to your election official. You can find their contact information at FVAP.gov.

- Remove the adhesive liner from the top and sides. Fold and seal tightly. If you printed the form, fold it and seal it in an envelope.
- All states accept this form by mail and many states accept this form by email and fax. See your state's guidelines at FVAP.gov.

Agency Disclosure Statement

The public reporting burden for this collection of information, OMB Control Number 0704-0503, is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or burden reduction suggestions to the Department of Defense, Washington Headquarters Services, at whs.mc-alex.esd.mbx.dd-dod-information-collections@mail.mil. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number. DO NOT SUBMIT YOUR FORM TO THE E-MAIL ADDRESS ABOVE.

Privacy Advisory

When completed, this form contains personally identifiable information and is protected by the Privacy Act of 1974, as amended.

Questions?
Email: vote@fvap.gov

(Fill in the address of your election office.
The address can be found online at FVAP.gov.)

To

NO POSTAGE NECESSARY IN THE U.S. MAIL - DMM 703.8.0

OFFICIAL ABSENTEE BALLOTING MATERIAL - FIRST CLASS MAIL



International airmail postage is required if not mailed using the U.S. Postal Service, APO/FPO/DPO system, or diplomatic pouch.

From
(Your name and mailing address)

U.S. Postage Paid
39 USC 3406
PAR AVION

