

SPOIL BALLOT REQUEST FOR NEW BALLOT

City of Kingsford

Precinct: 1 or 2

Date: _____

Election Date: _____

I, _____ (print name), a registered voter at
(address) _____ request that my absent voter ballot
for the current election be spoiled.

I also request that the clerk's office either:

_____ Provide a new absent voter ballot to me at the clerk's office; or
(Request must be received by 5:00 p.m. the Friday before the Election)

_____ Mail a new absent voter ballot to me at my current address
(Request must be received by 5:00 pm the Friday before the Election)

Voter Signature

Clerk's use only section

Spoil ballot Number: _____

Received by: _____

Tanya M. Hiltonen, Deputy Clerk

_____ Date