

Note:

## Office of the Pohnpei Election Commission P.O. Box 1180 Kolonia, Pohnpei, FM 96941

Tel: (691) 320-3469 Fax: (691) 320-8907 Email: pohnpeielection@yahoo.com

## **APPLICATION REQUESTING ABSENTEE BALLOT**

То	: Election Commissioner, Sta	ate of Pohnpei		
I	hei	reby request an absen	itee ballot for the Nett Special Electic	n
	uled to be held on October 15			
			ply with the State election law:	
1 30011	int the following information (	on me in order to com	pry with the state election law.	
1.	Election District or Municipa	ality		
2.	. Name of the place where I go and vote in Pohnpei			
	Ballot box number, if known			
4.	Reason for being absent			
5.	5. Address that I wish my ballot to be forwarded and include your telephone and email address, if any			
	addiess, ii diiy			
	-			
6.	An FSM citizen by: Birth		Naturalized	
7.	Already registered to vote	YES	Naturalizednot yet registered	
	I am a student	YES	NO	
Note:	(Send your request to your St	ate Election Commiss	ioner). Below is the address:	
	(coma your request to your ex			
	Ms. Alperina Donre			
	Acting Election Commissioner			
	Pohnpei State Government			
	P.O Box 1180			
	Kolonia, Pohnpei FM 96941			
	Tel: (691) 320-3469 Fax: (6	691) 320-8907		
	Email: pohnpeielection@yal	•		
	Linaii. poimpeiciection@yai	100.00111		
Thank	you.			
Applic	ant's full name	signature	date	

- 1. We will not accept hand carried ballot and hand carried ballot request.
- 2. We will not accept many ballots received in one package. Each voter will send his/her own ballot.
- 3. No one is allowed to request ballot on behalf of another person.