

1 Office of the Secretary of State

2

3 Adopted Permanent Rules Relating to Absentee Ballot Applications

4

5 Rules as Adopted

6 8210.0200 ABSENTEE BALLOT APPLICATION.

7 [For text of subps 1 to 3, see M.R.]

8 Subp. 4. Permanent application. An eligible voter who  
 9 meets the requirements in Minnesota Statutes, section 203B.04,  
 10 subdivision 5, may apply to the county auditor or municipal  
 11 clerk to automatically receive an absentee ballot application  
 12 for each election in which the voter is eligible to vote. The  
 13 county auditor shall make available the form provided in part  
 14 8210.9915 for this purpose. The voter shall complete the form  
 15 and return it to the county auditor or municipal clerk. A  
 16 municipal clerk who receives a completed application shall  
 17 forward it to the county auditor immediately. The completed  
 18 form must be attached to the voter's registration card.

19 The county auditor shall maintain a list of voters who have  
 20 applied to automatically receive an absentee ballot  
 21 application. At least 45 days before each election, the county  
 22 auditor or municipal clerk shall send an absentee ballot  
 23 application to each person on the list who is eligible to vote  
 24 in the election.

25 An application submitted by a voter under this subpart must  
 26 be retained permanently with the voter's registration record.  
 27 The form must be transferred with the voter's registration  
 28 record whenever a change in the voter's name, address, or status  
 29 occurs.

30 8210.9915 APPLICATION TO AUTOMATICALLY RECEIVE ABSENTEE BALLOT  
 31 APPLICATIONS, SPECIFIED BY PART 8210.0200.

32 APPLICATION TO AUTOMATICALLY RECEIVE  
 33 ABSENTEE BALLOT APPLICATIONS

34 Name \_\_\_\_\_  
 35 Last First Middle  
 36  
 37 Township or City

1 of Legal Residence \_\_\_\_\_  
2                               Township or City                               County  
3  
4 Address of  
5 Legal Residence \_\_\_\_\_  
6                               Street Address or Route and Box Number  
7  
8 Mailing Address  
9 for Application  
10 (if different) \_\_\_\_\_  
11                               Street Address or Route and Box Number  
12  
13  
14                               Mailing City                               State                               Zip  
15  
16 Date of Birth \_\_\_\_\_ Telephone Number \_\_\_\_\_  
17

18 I certify that I reasonably expect to be permanently unable to  
19 vote in person at the polling place for my precinct due to  
20 illness or disability and hereby request that an application for  
21 absentee ballots be sent to me before each election in which I  
22 am eligible to vote.

23  
24  
25  
26 \_\_\_\_\_ Signature                               Date