

**Replacement Early Voting Ballot Statement**

If you need to request a replacement early voting ballot, please fill out the following statement.

Applications must be physically signed. You can take a picture or scan your request and email it to your county election official. You can also mail or fax your application to your county election office.

You must submit your application to have a replacement ballot mailed to you by 6 p.m. on the second Friday before the election. If you have any questions, please contact your county election official. You can find contact information for your county election official at: sos.nebraska.gov/elections/election-officials-contact-information

Check the status of your early voting ballot at: ne.gov/go/votercheck

Voter Information

1

Last Name _____ First Name _____

Middle (name or initial) _____ Suffix (Jr, III, if any) _____

Date of Birth (mm/dd/yyyy)

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Reason for Replacement Ballot

2

☐ Not Received ☐ Lost ☐ Spoiled ☐ Destroyed**I request a replacement early voting ballot for the following election**

4

☐ 2024 Statewide General Election ☐ Special Election on _____**I request that my replacement ballot be:**

3

☐ Voted now in the election office **OR**☐ Mailed to me at: Street or PO Box _____

Apartment or Lot (if any) _____

City, State, ZIP _____

I hereby declare, under penalty of election falsification, that the above information is true.

Signature of Voter

X _____

Date _____



WARNING: The penalty for election falsification is imprisonment for up to two years imprisonment and twelve months post-release supervision, a fine of up to ten thousand dollars, or both.

Return Completed Application to:

_____ County Election Office

Fax: _____ or Email: _____

Election Office Use Only

Date Received: _____

To Replace Early Voting Application Number (if applicable): _____

Disposition: ☐ Mailed on: _____ ☐ Voted in Office on: _____ ☐ Arrived Too Late