

# 2022 VOTE-BY-MAIL REQUEST CARD

Information in yellow is required

I would like to receive a vote by mail ballot for all elections for which I am eligible through 12/31/2022.

Name: \_\_\_\_\_

Legal Residence: (no P.O. Box)  
\_\_\_\_\_  
\_\_\_\_\_

Date of Birth:

One of the following identification numbers are required

Florida Driver License # \_\_\_\_\_

Florida ID Card # \_\_\_\_\_

Last 4 of Social Security # \_\_\_\_\_

Mail Ballot to:  
\_\_\_\_\_  
\_\_\_\_\_

Phone #: \_\_\_\_\_

**VOTER  
MUST SIGN** →

Date: \_\_\_\_\_

Place this request card in the enclosed postage paid envelope and return to 421 S Court St, Bronson FL 32621.