



Permanent Absentee Ballot Request

Note: In order to receive an absentee ballot, you must be a registered elector.

I certify that I am indefinitely confined because of age, illness, infirmity or disability and request absentee ballots be sent to me for every subsequent election until I am no longer confined or fail to return a ballot for an election.

Name (please print) _____

Residence Address _____

Voter Birthdate _____

Phone Number _____ E-Mail _____

Mailing Address (if different than Residence) – Send ballot to:

Note: To remain on the permanent absentee list, you must return your ballot for each election.

Signature of Elector X _____

Date signed _____

**Return to: Fitchburg City Clerk
Fitchburg City Hall
5520 Lacy Road
Fitchburg, WI 53711**