## CITY OF GUSTAVUS, ALASKA APPLICATION FOR ABSENTEE BALLOT

I,	, A QUALIFIED VOTER AND
RESIDENT OF THE CITY OF	GUSTAVUS, ALASKA HEREBY APPLY FOR AN ABSENTEE BALLOT
FOR THE CITY ELECTION T	O BE HELD ON OCTOBER 7, 2025.
RESIDENCE ADDRESS:	
MAILING ADDRESS: (IF OTF	HER THAN RESIDENCE ADDRESS)
PHONE NUMBER	
PHONE NUMBER	
REASON FOR REQUESTING	ABSENTEE BALLOT:
ADDDESS TO WHICH ARSE	NTEE BALLOT SHOULD BE MAILED:
ADDRESS TO WHICH ABSEL	NIEE BALLOI SHOULD BE MAILED:
	*Note: An absentee ballot is for a registered voter who
	will not be in Gustavus on Election Day, and it may not
	be mailed to a Gustavus address.
VOTER REGISTRATION NUM	MBER, SOCIAL SECURITY NUMBER, OR BIRTHDATE:
VOIDE REGISTRATION NO.	
SIGNED:	DATE:
RECEIVED BY:	DATE:
PLEASE MAIL THIS APPLICATI	ON TO: Office of the City Clerk, City of Gustavus, P.O. Box 1, Gustavus.

An application made by mail must be received by the City Clerk or Designee no more than forty-five (08-23-2025), nor less than twenty days (09-17-2025) before a city election. An application made in person must be filed with the City Clerk or Designee not more than twenty days (9-17-2024) before the City election, and not later than noon on the day before (10-07-2025) the City election. Absentee ballots must be returned by Friday, October 10, 2025.

Alaska, 99826