STATE OF COLORADO
REQUEST FOR REPLACEMENT BALLOT

Please note: This completed form MUST be returned by 7:00 p.m. on Election Day. If returning with your ballot, place this form in the return envelope, not in the secrecy sleeve.

VOTER INFORMATION (PLEASE PRINT):

Last Name (Required)	First Name (Required)	Middle Initial	Previous Name of Applicant – If Applicable

Colorado Legal Residence Street Address (Required) – No P.O. Boxes	Apt/Unit #	City/Town (Required)	State (Required)	Zip (Required)
Mailing Address or P.O. Box – Required if different from residential address	Apt/Unit #	City/Town (Required)	State (Required)	Zip (Required)

Date of Birth (Required)	Colorado Driver's License Number **OR** State Issued ID Number	Social Security Number – At Least the Last 4 digits	Telephone Number (Including Area Code)
____/____/_____ MM DD YYYY			( ) -

REPLACEMENT BALLOT INFORMATION:

I am requesting a Replacement Ballot for the election because:

☐ I did not receive the original ballot. ☐ I spoiled the original ballot.

☐ I am personally receiving the ballot today.

☐ Please mail the ballot to me at:

_____
Street Apt/Unit # City State Zip

READ, SIGN AND DATE:

I swear or affirm that I am requesting the replacement ballot for the reasons stated above, that I have not voted the original ballot issued for the election indicated and I do not intend to vote at the election except by voting the replacement ballot.

Signature or Mark (Required)

X_____
Signature (Required)

Date Signed (Required) ____/____/_____
MM DD YYYY

IMPORTANT: **Make sure to sign and date the Affidavit of Voter on your return envelope before returning your voted ballot.** Your signature must be provided or your ballot cannot be counted pursuant to Colorado Law. (C.R.S. 1-8-304)

Colorado Law requires that in order for your ballot to be counted, **it must be received in the County Clerk's Office by 7:00 p.m. on Election Day.**

Postmarks do NOT count as receipt of the ballot.

FOR OFFICE USE ONLY:

Election Clerk: _____	Voter ID #: _____
Original Ballot Pct & Style #: _____	Replacement Ballot Pct & Style #: _____
Original Ballot #: _____	Replacement Ballot #: _____
Original Date Issued: _____	Replacement Date Issued: _____

SOS Approved 4/08/08
C.R.S. 1-7.5-107(3)(d) & 1-8-111 (3)