



Carson City

Mail Ballot Preference Form

You have a choice. Registered voters will receive mail ballots for all elections.

Use this form to let us know that:

- You want to vote in person and do not want a mail ballot. You must submit this form at least 60 days before the next election.
- OR
- You now want to receive a mail ballot after you previously indicated you wanted to vote in person.

Voter Information

Last name _____ First name _____
Middle name _____ Date of birth MM/DD/YY _____

NV driver's license or ID card# (if applicable) _____

Permanent voter address

2 Street _____ Unit# _____
City _____ State NV Zip _____

Mail ballot preference

☐ I want to vote in person

☐ Send me a ballot

Check only one option.

Do not send me a ballot.

OR

I want to vote by mail in the following elections:

3 Submit this form at least 60 days before the next election so we can remove your name from the mailing lists.

- ☐ All Future Elections
☐ Next Presidential Preference Election Only
☐ Next Primary Election Only
☐ Next General Election Only
☐ Next Special Election Only

Where should we send your ballot?

Check only one option.

Only complete this section if you are voting by mail.

in section 2

☐ A different address:

Street/ P.O. Box _____ Unit# _____
4 City _____ State _____ Zip _____

If you want this address to be your new permanent mailing address, go to registertovote.nv.gov to update your voter registration or check here: ☐

Contact information

For official communication only.

5 Phone _____ Email _____

☐ My permanent voter address

(Your email address is confidential)

Signature Required

I certify that all the information on this form is true and correct.

I understand that this will not affect my status as a registered voter.

6 Voter signature _____ Date (mm/dd/yyyy) _____

X	
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You must submit this form at least 60 days before the next election.

For Official Use Only

Registration # _____