ASG FORM EO-08
Revised August 2010

AMERICAN SAMOA GOVERNMENT
PAGO PAGO, AMERICAN SAMOA 96799

ELECTION OFFICE
REQUEST FOR ABSENTEE BALLOT FORM

1. Name: _____ **Registration No.:** _____
First **Middle** **Last**

3. **Social Security No.:** _____-_____-_____ **4. Last Voted:** _____ _____ _____
Year **District** **Village**

5. Date of Birth: _____/_____/_____.

6. I will be absent from the Territory on election day because I am (select one) – Absentee Voter Status:
[ ] Employed in the service of the U.S. Government **[ ]** An *absent uniformed services voter* (including spouse or dependent)*
[ ] A student at an institution of learning **[ ]** Employed in the service of the American Samoa Government
[ ] An *overseas voter* voting for the Delegate to the U.S. House of Representatives*

7. Actual Residence (Address):
_____
_____
_____

8. Mailing Address (Do not leave blank):
_____
_____
_____

Complete 9 only if you are an absent uniformed services voter or an overseas voter voting for Delegate to the U.S. House of Representatives.

9. I prefer to receive my absentee ballot by: (select one): [ ] Mail [ ] Facsimile [ ] Electronic Mail

Facsimile No.: ( ) _____; OR **Email Address:** _____

All absentee ballots for local office (Governor, Lt. Governor and Representatives to the American Samoa Legislature) will be transmitted by regular postal mail regardless of absentee voter status.

10. THIS PORTION MUST BE COMPLETED BY THE APPROPRIATE OFFICIAL. DO NOT LEAVE BLANK.

Military Service/Employment/School: Verification of number 6 above:

_____ _____ _____
Type/Print Name Title Organization

_____ _____
Signature of Official Date

I hereby swear/affirm that the foregoing information is true and correct. If any part of this Request is untrue, I understand that it may hamper my right to vote.

_____ _____
Signature of Applicant Date

This application may be returned in person or mailed, faxed, or emailed to:

Chief Election Officer
Election Office
American Samoa Government
P.O. Box 3970
Pago Pago, American Samoa 96799
Fax No.(684) 699-3574
Email: asgelect@samoatelco.com

**As defined by the Uniformed and Overseas Citizens Absentee Voting Act of 1986, as amended, 42 U.S.C. 1973ff, et seq., and Section 6.0102, A.S.C.A.*