

APPLICATION FOR PERMANENT ABSENTEE VOTER STATUS

TO: Veronica Ross, Designated Election Official
Eagle County Health Service District ("District"):
vross@ecparamedics.com
PO Box 990 Edwards, CO 81632

I, _____, whose date of birth is _____,
19____, am registered to vote pursuant to the "Colorado Uniform Election Code of 1992" and I
am:

- A resident of the District; or
- The owner (or spouse or civil union partner of owner) of the taxable real or personal property (described below) situated within the boundaries of the District. A person who is obligated to pay taxes under a contract to purchase taxable property within the District shall be considered an owner of taxable property for the purpose of qualifying as an elector.

Physical address or description of property: _____

My residence address is _____,
City _____, Zip Code _____, County of _____, State
of Colorado. The address for the absentee ballot to be mailed is _____
_____.

I am applying for permanent absentee voter status with the District and wish to receive a ballot for every election conducted by the District.

Signature

Name Printed

Date

*Witnessed By _____

*Application shall be signed personally by the applicant or a family member related by blood, marriage, civil union, or adoption to the applicant. In case of applicant's inability to sign his/her name, the elector's mark shall be witnessed by another person.