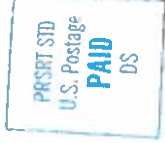


Governor Tom Wolf
P.O. Box 22611
Philadelphia, PA 19110



**IMPORTANT VOTING UPDATE
FROM GOVERNOR TOM WOLF**



Dear Registered Voter—

All Pennsylvania voters can securely vote from home by using the enclosed application to request a mail-in ballot.

The best way to protect your freedom to make your own health care decisions, provide for yourself and your family, have clean air to breathe, and have an equal say in the decisions that impact our lives, is to return the enclosed application today.

Sincerely,



Tom Wolf



THREE EASY STEPS TO SUBMIT YOUR MAIL-IN BALLOT TODAY

1.

COMPLETE

the enclosed request form.



2.

SEAL IT

in the return envelope.



3.

MAIL IT

back.



You can also visit [VOTE.PA/VOTE-BY-MAIL](https://www.vote.pa.gov/vote-by-mail) to complete your mail-in ballot request online.

VOTER ALERT:

All registered voters in Pennsylvania are eligible to vote by mail.



Voting by mail is secure, convenient, and easy to do. Your mail-in ballot will remain secret, and your vote will be counted.

By using the enclosed form, you can request your ballot today — no stamp needed!



1. Fill out the enclosed request form.

- Verify that all of your information is accurate.
- Add your email address and/or phone number on line 2.
- Add your Driver's License Number or PennDOT ID Number on line 5, or the last four digits of your Social Security Number if you don't have a Driver's License or PennDOT ID.
- Sign and date your application on line 6.



2. Fold your completed request form and place it in the enclosed envelope.



Pennsylvania Application for Mail-In Ballot

Use black ink

Print your name

Please print your name exactly as you registered to vote.

1

Last name [REDACTED]

Jr Sr II III IV (circle if applicable)

First name [REDACTED]

Middle name or initial [REDACTED]

About you

Phone and email are optional and used if information is missing on this form.

2

Birth date [REDACTED]

Phone

Email

Your address

Please print your address exactly as you registered to vote.

3

Address (not P.O. Box) [REDACTED]

Apt. number

City/Town [REDACTED]

State PA Zip code [REDACTED]

Municipality Wilkes Barre City W 01

County Luzerne

Ward (if known)

Voting district (if known)

I have lived at this address since:

Where to mail ballot?

4

Same as above Address or P.O. Box [REDACTED]

City/Town Linesville

State P A Zip code [REDACTED]

Identification

If you have a PennDOT number, you must use it. If not, please provide the last four digits of your Social Security number.

5

PA driver's license or PennDOT ID card number [REDACTED]

Last four digits of your Social Security number X X X - X X - [REDACTED]

I do not have a PA driver's license or a PennDOT ID card or a Social Security number.

Declaration

6

I declare that I am eligible to vote by mail-in ballot at the forthcoming primary or election; that I am requesting the ballot of the party with which I am enrolled according to my voter registration record, and that all of the information which I have listed on this mail-in ballot application is true and correct.

Voter signature here X

Date

Annual mail-in request

See "What is an annual mail-in ballot request?" for more information.

7

If you would like to apply to receive mail-in ballots for the remainder of this year and if you would like to automatically receive an annual application for mail-in ballots each year, please indicate below.

I would like to receive mail-in ballots this year and receive annual applications for mail-in ballots each year.

Help with this form

Complete this section if you are unable to sign the declaration in Section 6.

8

I hereby state that I am unable to sign my application for a mail-in ballot without assistance because I am unable to write by reason of my illness or physical disability. I have made or have received assistance in making my mark in lieu of my signature.

Mark of voter X

Date

Address of witness

Signature of witness X

For County Office Use

Voter ID Number: [REDACTED]