Reset Form

AFFIDAVIT OF INDIVIDUAL FILING ABSENTEE BALLOT APPLICATION(S) WITH COUNTY

(ABS-17)

State Form 52411 (R3 / 8-19)
Indiana Election Division (IC 3-11-4-2)

INSTRUCTIONS: (*NOTE: The Indiana election division, a county election board, or a county board of elections and registration is not required to file this affidavit if delivering an absentee ballot application. An employee of the United States Postal Service, or an employee of a bonded courier company is not required to file this affidavit if the person is delivering an absentee ballot application as part of their duties with the Postal Service or the courier company).*

Any other person who receives a completed absentee ballot application from the individual who applied for the absentee ballot is required by state law to file that application with the county election board not later than **noon 10 days** after the person receives the application *(or the deadline set by Indiana law to file the application*), whichever occurs first.

IF MORE THAN ONE ABSENTEE BALLOT APPLICATION IS SUBMITTED by this person to the county election board at the same time, the person may complete one copy of this affidavit. The county election board must identify each application attached to this affidavit and may do so under "Tracking Information" below.

AFFIDAVIT OF PERSON FILING ABSENTEE BALLOT APPLICATION

Full Name *(please print)*	
Residence Address *(number and street)*	City/Town, State, ZIP Code
Mailing Address *(If different from residence address)*	City/Town, State, ZIP Code
Telephone Number (Day) *(if any)* ( )	Telephone Number (Evening) *(if any)* ( )

I swear *or affirm* under the penalties of perjury the following:

(1) that I have complied with Indiana laws governing the submission of absentee ballot applications; and
(2) I have no knowledge or reason to believe that the individual(s) whose application(s) I am filing
  (A) is (are) ineligible to vote or to cast an absentee ballot; or
  (B) did not properly complete and sign the absentee ballot application(s).
(3) that I received the application(s) from the applicant.
(4) the date (or dates) that the absentee ballot application(s) attached to this affidavit were received on was:

_____

(Insert date. If the applications received on more than one date, indicate the date each application was received.)

Signature	Date signed *(month, day, year)* _____/_____/20_____

Penalty for perjury: A person who makes a false, material statement under oath or affirmation, knowing the statement to be false or not believing it to be true commits perjury, a Level 6 felony, punishable by imprisonment for up to 2 ½ years, a fine of $10,000, or both.

FOR COUNTY ELECTION BOARD USE ONLY
(Use reverse of form if necessary.)

Date and Time Affidavit Filed:

AM PM _____/_____/**20**__

Tracking Information *(for multiple absentee ballot applications submitted with affidavit)*:

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