



**CHALLENGE AFFIDAVIT OF A VOTER BY A CHALLENGER OR  
MEMBER OF THE PRECINCT ELECTION BOARD /  
AFFIDAVIT OF A CHALLENGED VOTER**

**(PRE-4)**

State Form 42132 (R15 / 11-25)

Indiana Election Division (IC 3-11-8-21; 3-11-8-23.5; 3-11.5-4-13.5; 3-11.5-4-13.6)

Is this an absentee ballot? ☐ Yes ☐ No

**INSTRUCTIONS:** After the challenger completes this side of the form, the challenged voter may complete the second page of this form. If the challenged voter does so, the challenged voter is entitled to cast a provisional ballot. Do not use this form to challenge a voter at a primary election due to the voter's party affiliation. Use PRE-6 form instead.

**NOTE: THIS FORM MUST BE PRINTED DIRECTLY ON THE PRO-2 PROVISIONAL BALLOT SECURITY ENVELOPE.**

STATE OF INDIANA, COUNTY OF \_\_\_\_\_

**GENERAL INFORMATION**

the undersigned, believe that \_\_\_\_\_, now offering to vote, is not a legal voter in this precinct, for the following reason(s):  
(Insert name of voter.)

**Voter Eligibility – Fail Safe Procedures**

1. ☐ This voter's name is not included on the poll list, and is **NOT** entitled to vote by using a "Fail Safe" procedure.  
2. ☐ This voter's name **is** included on the poll list, but this voter does not currently reside in the precinct, and is **NOT** entitled to vote in this precinct by completing a VRG-4/12 form or a VRG-15 form, or other "Fail Safe" procedure.

**Voter Identification**

3. ☐ This voter was unable or declined to present proof of identification when required by law to do so.  
4. ☐ This voter is identified on the poll list as required to present an additional document that confirms the voter's identity and current residence address, but has not done so.

**Voter Eligibility - General Requirements**

5. ☐ This voter is not a U.S. citizen.  
6. ☐ This voter will not be eighteen (18) years of age or older at the general election.  
7. ☐ This voter's signature on the election day poll list does not match the signature on the voter's registration record.  
8. ☐ This voter's signature on the absentee ballot security envelope affidavit is missing or does not match the signature on the voter's absentee ballot application, electronic poll book, or registration record maintained in the statewide voter registration system.  
9. ☐ Other \_\_\_\_\_  
(Insert specific reason for challenging voter.)

I obtained the information from \_\_\_\_\_  
(Insert name of person(s) supplying information for challenge.)

**CHALLENGER AFFIRMATION**

I swear (or affirm) that the foregoing statements are true, to the best of my knowledge and belief, and understand that making a false statement on this affidavit is punishable under the penalties of perjury.

Signature of challenger	Printed name	If serving as precinct officer: <input type="checkbox"/> Inspector <input type="checkbox"/> Judge <input type="checkbox"/> Poll Clerk
Precinct	Township or ward	City or town

**AFFIRMATION OF AFFIDAVIT**

STATE OF \_\_\_\_\_ )  
COUNTY OF \_\_\_\_\_ )  
I swear (or affirm) that the above challenge affidavit of a voter was subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

Signature of Official Administering Oath (Inspector, Judge, Poll Clerk, Sheriff, or Absentee Board Member Other than Challenger above) \_\_\_\_\_ Printed Name and Title \_\_\_\_\_

**AFFIDAVIT OF A CHALLENGED VOTER**

STATE OF INDIANA, COUNTY OF \_\_\_\_\_

**GENERAL INFORMATION**

- I, the undersigned, state the following:  
1. that I am a citizen of the United States.  
2. that my date of birth is \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ (mm/dd/yy) to the best of my information and belief.  
3. that I have been a bona fide resident of this precinct for thirty (30) days immediately before this election or I am qualified to vote in this precinct under IC 3-10-10, IC 3-10-11, or IC 3-10-12.  
4. that I am generally known by the name in which I desire to vote, which is \_\_\_\_\_  
5. that I have not voted and will not vote in any other precinct in this election.  
6. that my present residence address is \_\_\_\_\_  
(and, if applicable, my residence address thirty (30) days before this election was at: \_\_\_\_\_)  
I moved to my residence address in this precinct on the following date: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ (mm/dd/yy)  
7. that, if applicable, if I was challenged under boxes 3 or 4 on the *Affidavit of a Voter By a Challenger* portion of this form, I did present proof of identification or additional documentation that complied with IC 3-5-2-40.5 or IC 3-7-33-4.5.  
8. for the primary election only, I requested a party primary ballot for the ☐ **DEMOCRATIC PARTY** ☐ **REPUBLICAN PARTY** OR, if applicable, ☐ **PUBLIC QUESTION ONLY**

**CHALLENGED VOTER AFFIRMATION**

I swear (or affirm) that the foregoing statements are true, to the best of my knowledge and belief, and understand that making a false statement on this affidavit is punishable under the penalties of perjury.

Signature of challenged voter	Printed name
Precinct	Township or ward
	City or town

**AFFIRMATION OF AFFIDAVIT**

STATE OF \_\_\_\_\_ )  
COUNTY OF \_\_\_\_\_ )  
I swear (or affirm) that the above challenge affidavit of a voter was subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

Signature of Official Administering Oath (Inspector, Judge, Poll Clerk, Sheriff, or Absentee Board Member Other than Challenger above) \_\_\_\_\_ Printed Name and Title \_\_\_\_\_



# PROVISIONAL BALLOT SECURITY ENVELOPE

Part of State Form 42132 (R15 / 7-25)  
Indiana Election Division (IC 3-11.7-1-8; 3-11.7-5-3; 3-11.5-4-13.5; 3-11.5-4-13.6)

(PRO-2)

## TO THE VOTER

**READ CAREFULLY AND FOLLOW THE INSTRUCTIONS BELOW.**

STATE OF INDIANA )  
 )  
COUNTY OF \_\_\_\_\_ )

I, *(Print your name and address below.)*

Name of Voter: \_\_\_\_\_

Residence Address of Voter *(number and street, city, state, and ZIP code):*

Telephone number *(optional)*: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

have cast the enclosed provisional ballot at Precinct Name: \_\_\_\_\_

at the *(select one)* ☐ PRIMARY ☐ GENERAL ☐ MUNICIPAL ☐ SPECIAL ELECTION

For the Primary Election Only: I requested a party primary ballot for the ☐ DEMOCRATIC PARTY ☐ REPUBLICAN PARTY OR, if applicable, ☐ PUBLIC QUESTION ONLY

to be held on:

\_\_\_\_\_  
*(Insert date (mm/dd/yy) of election.)*

Signature of voter

Date signed *(mm/dd/yy)*

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

## COUNTY ELECTION BOARD FINDINGS

**NOTE:** Absentee voters voting by mail or traveling board do not complete PRO-2 because the application serves as the voter's response to the challenge.

The enclosed provisional ballot is determined to be:

☐ Valid  
☐ Invalid due to the following reason: \_\_\_\_\_

If invalid, this envelope may not be opened, and this ballot may not be counted.

Dated *(mm/dd/yy)*: \_\_\_\_\_

\_\_\_\_\_  
County Election Board

**TO THE PROVISIONAL BALLOT COUNTERS:** After the ballot has been found valid by the county election board, open this envelope carefully. Do not deface or destroy the affidavit or the envelope. Take out the ballot enclosed for processing. If the ballot does not contain the initials of the poll clerks, the ballot shall, without being unfolded to disclose how the ballot is marked, be endorsed with the word "Rejected" and enclosed in State Form PRO-7 envelope.