JOTE BY	Municipality of A Municipal Clerk ² Regular Municipal Election Tu Application to	's Office lesday, April 1, 2025 Vote by	Anchorage
RIAL	Secure Docume	ent Portal	Anie?
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	Print, complete all fields, see back for instructions and a plication must be received by 5:00 p.m.	dditional information.	
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First	MI Las	Ĩ	Suffix (Sr., Jr., III, etc.
2. Residence Address		t # (if applicable)	City Zia
(Complete physical address in Anchorage) BUII	ding number and street name Ap	ot # (if applicable)	City Zip
	ou want to receive the lin ed through Secure Docu		
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ballot package (accessed Email address 5. Identifier (VOTER must	ed through Secure Docu Drovide at least one of the Last 4 digits SSN print (if you are completing ritten signature. mation on this form is true, accurate, an uested a ballot from any other state, and elony, or having been so convicted, having n another state or I have taken the necess tronic TRANSMISSION TO RETURN tentially Disclosing PERSONAL NMY BALLOT IS NOT GUARANTEEL ISOLATE AND STRIP ATTACHMENT TY TO FOLLOW UP AND CONFIRM T	following numbers.) following numbers.) DC ing an electronic ap d complete to the best of my kn d I am not voting in any other m /e been unconditionally discharg sesary steps that cancel that reg MY MARKED BALLOT, I AM L IDENTIFYING INFORMATION D AND A FAULTY TRANSMISS S LIKE MY APPLICATION OR (HAT MY APPLICATION AND C	DB plication), and sign nowledge; that I am eligible to vo nanner in the election. I further ged from incarceration, probation jistration. VOLUNTARILY WAIVING MY N. I AM ASSUMING THE RISK SION MAY OCCUR, AND I MY VOTED BALLOT. I

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Voter #	Voter Status	Signature Verified \Box	Verified by
Reg. Ballot Style	Res. Ballot Style	Issued Ballot Package ID_	
Voided Ballot Package ID	Reissued Ba	llot Package ID	Verified by
Issued Ballot Style	Date Emailed	Date Returned	Verified By

Municipality of Anchorage

Application to Vote by Secure Document Portal Instructions and Information

- Type or print legibly and use dark ink.
- Provide your complete Municipality of Anchorage residence address. Your application will not be processed if the residence address is left blank or incomplete, or if you submit a PO Box, PSC Box, commercial address, or mail stop.
 - If your Anchorage residence address has changed, provide your <u>new address</u> on the application. This will not update your voter registration.
- Provide a telephone number and email address where we can contact you.
- **Provide the email address** where you want to receive your ballot package.
- **Provide at least one identifier:** voter number, last four digits of your social security number, or date of birth. This information is kept confidential.
- Provide your handwritten signature and date.
- Hand-deliver, mail, fax, or scan and email completed application to MOA Elections or the Municipal Clerk's Office.

Physical address:	MOA Elections, 619 East Ship Creek Avenue, Door D, Anchorage, AK 99501; OR Municipal Clerk's Office, 632 West 6 th Avenue, Suite 250, Anchorage, AK 99501
Mailing address:	MOA Elections, Attn. Electronic Voting Team, PO Box 196659, Anchorage, AK 99519
Fax:	907-343-4313
Email:	elections@anchorageak.gov

- Completed applications received after 5:00 p.m. AKDT on Monday, March 31, 2025, will not be processed. Voters are encouraged to submit their applications as soon as possible.
- Secure Document Portal links will be emailed in the order that applications are received beginning the day that ballots are mailed. If you do not receive your ballot by Monday, March 31, 2025, call 907-243-VOTE (8683) before noon AKDT to obtain a replacement link.
- Return your ballot as soon as possible. Voted ballots, including the voter declaration, must be <u>received</u> by 8:00 p.m. AKDT on Election Day, Tuesday, April 1, 2025.

Questions? Please email <u>elections@anchorageak.gov</u> or call the MOA Elections Voter Hotline - 907-243-VOTE (8683).