



# Permanent Disabled List Application

Voter's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Last Four Digits of SSN: \_\_\_\_\_

Email Address (optional): \_\_\_\_\_

Residential Address: \_\_\_\_\_

City: \_\_\_\_\_ State: MO Zip Code: \_\_\_\_\_

Mailing Address (if different from residential address): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

I declare that I am a resident and registered voter of Greene County, Missouri, and am permanently disabled. I hereby request that my name be placed on the election authority's list of voters qualified to participate as absentee voters pursuant to section 115.284 (RSMo), and that I be delivered an absentee ballot application for each election in which I am eligible to vote.

\_\_\_\_\_  
Voter's Signature Date

Mail this completed form to the **Greene County Clerk's Office at 940 N Boonville Ave, RM 113, Springfield, Missouri 65802**. You may also email or fax this completed request to: [absenteevoting@greencountymo.gov](mailto:absenteevoting@greencountymo.gov) (email) or **(417)868-4170** (fax). The appropriate address for all other Missouri local election authorities can be found on the Missouri Secretary of State's website ([www.sos.mo.gov/elections/countyclerks](http://www.sos.mo.gov/elections/countyclerks)).

Missouri law requires that requests for absentee ballots must be received by **5:00 p.m. on the second Wednesday** prior to Election Day if the ballot is to be mailed. The deadline for absentee voting in person in the office of the election authority is **5:00 p.m. on the day** before the election. If you registered by mail and this is your first time voting you must provide a copy of current valid photo identification or a copy of a current utility bill, bank statement, government check, paycheck, or government document that shows your name and address.