2023-2024 MUNICIPAL AND SCHOOL ELECTION WORKSHOP WEBINAR 4 SOUTH

THE

000

PEOPY

SPONSORED BY

SECRETARY OF STATE'S OFFICE

SOUTH DAKOTA MUNICIPAL LEAGUE

ASSOCIATED SCHOOL BOARDS OF SOUTH DAKOTA

CONTACT INFORMATION

Elections Team

Rachel Soulek: Director, Division of Elections

Christine Lehrkamp: Deputy Director, Division of Elections

Bailey Tibbs: State Elections Coordinator

Heather Irwin: Elections Systems Administrator

Kendra Kuiper: Election Assistant



General email that goes to all staff <u>elections@state.sd.us</u>

Elections Division - 605.773.3537

Contact Information



- SD MUNICIPAL LEAGUE
 - SARA RANKIN, DIRECTOR OF RESEARCH & TRAINING
 - <u>SARA@SDMUNICIPALLEAGUE.ORG</u>
 - 605-224-8654
- ASSOCIATED SCHOOL BOARDS OF SOUTH DAKOTA
 - TYLER PICKNER, DIRECTOR OF COMMUNICATIONS
 - <u>TPICKNER@ASBSD.ORG</u>
 - 605-773-2500
 - HOLLY NAGEL, CFO/DIRECTOR OF PROTECTIVE TRUST SERVICES
 - HNAGEL@ASBSD.ORG
 - 605-773-2500

ABSENTEE VOTING

• Any registered voter, without a reason, may vote by absentee ballot.

- Absentee ballots must be made available no later than **fifteen days** prior to the election.
- If you combine with a Primary or General Election, the ballots must be available 46 days prior to the election.
 (SDCL 9-13-21, 13-7-13 and 12-19-1.2)

On the cities and school resource page, there are PDFs available outlining how you conduct absentee voting.

ABSENTEE BALLOT APPLICATION



THERE ARE MANY WAYS TO REQUEST AN ABSENTEE BALLOT:

- PRESCRIBED FORM (<u>ARSD 5:02:10:01</u>) CAN BE FOUND AT <u>WWW.SDSOS.GOV</u>.
- FEDERAL POST CARD APPLICATION (FPCA).
- LETTER (MUST INCLUDE EVERYTHING THAT IS ON THE ABSENTEE BALLOT APPLICATION)
- ALL OF THE ABOVE MUST BE SIGNED, DATED AND COMPLETE.
 - NEEDS AN ORIGINAL SIGNATURE, NOT ELECTRONIC.

ABSENTEE BALLOT LOG

- Keep an absentee ballot log (<u>SDCL 12-19-2</u>)
- o <u>This is a public record</u>
- Contents prescribed in <u>05:02:10:06</u>
 - (1) Date of election and party designation if primary ballot;
 - (2) Name of voter;
 - (3) Current mailing address of voter;
 - (4) Voting precinct;
 - (5) Regular or UOCAVA voter;
 - (6) Date mailed to voter, given to authorized messenger, or voted in office;
 - (7) Name of authorized messenger;
 - (8) Date returned;
 - (9) Date application received;

(10) Email address if electronic transmission requested by UOCAVA voter (this is only for an election a county auditor runs, a local election does not have the option to transmit a ballot electronically through the state UOCAVA system); and
(11) Voter registration address.

ABSENTEE BALLOT APPLICATION

- CHECK REGISTRATION LIST <u>BEFORE</u> SENDING AN APPLICATION OR BALLOT.
 - IF THEY AREN'T REGISTERED OR THEY ARE INACTIVE INCLUDE A VOTER REGISTRATION FORM WITH THE APPLICATION.
 - IF THEY AREN'T REGISTERED TO VOTE OR ARE INACTIVE BUT HAVE SUBMITTED THE ABSENTEE APPLICATION, THEY NEED TO COMPLETE AND SUBMIT A VOTER REGISTRATION
 FORM <u>BEFORE THE ABSENTEE BALLOTS ARE PROCESSED</u> <u>ON ELECTION DAY</u>.
 - SEND THE VOTER REG. FORM BACK SEPARATELY, NOT WITH THE BALLOT

and the second second

 GIVE THESE TOP PRIORITY SINCE THERE ARE ONLY 15 DAYS OF ABSENTEE VOTING.



Please note: form last updated December 2020

A. C.	County								
	Please print and return to the count	y auditor in the	county you are reg	istered. A new application	on must be con	npleted EACH calendar year.			
You may apply for an absentee ballot before 5:00 p.m. the day before the election for any or all general, primary, municipal, school, or any other elections conducted in this calendar year with one request. Additional information on absentee voting is available at sdsos.gov.									
1	Last Name F	irst Name		Middle Name(s)/Initial		Suffix			
2	Voter Registration Address		Apt. or Lot #	City, State		Zip Code			
3	Absentee ballot mailing address (if different from Section #2)			City, State		Zip Code			
SE	LECT THE ELECTION(S) YOU ARE REQU	ESTING AN ABSE	ENTEE BALLOT FOR	If your address changes af	ter this is submit	ted, you must submit a new form.			
4	□ All □ General □ Primary □ Municipal □ School □ Any Other You will receive the Primary Election ballot of your party registration, if one is available. If you are registered as an independent/no party affiliation and are requesting a Primary Election ballot, you may have a choice of the following: □ Democratic □ Libertarian □ Non-Political (You can only mark one selection.)								
5	1	Daytime telephone number If request is for a municipal or school election: I have lived in that jurisdiction at least 30 days in the last year. YES I am a full-time student who resided in that jurisdiction prior to leaving. YES							
MI	LITARY AND OVERSEAS CITIZENS ONLY								
6	 YES D NO - I am a member of the Uniformed Services or Merchant Marine on active duty YES NO - I am an eligible spouse or dependent of a member of the Uniformed Services or Merchant Marine on active duty YES NO - I am a U.S. citizen residing outside the United States If you checked no for all questions, proceed to section #7. If you would like your ballot sent electronically (for Primary and General Elections ONLY) instead of first class mail, provide your e-mail address: E-mail address (MILITARY AND OVERSEAS CITIZENS ONLY): *An overseas military, overseas citizen, or stateside military, a spouse or dependent of the same, voter is not required to submit a photocopy of the voter's ID. *Any military and overseas voter may submit a signed application for absentee ballot by fax or e-mail. 								
7	An acceptable ID is: A South Dakota driver's license or non-driver ID card, a passport or other picture ID issued by the United States governme a tribal photo ID, or a current student photo ID issued by a South Dakota high school or postsecondary education institution. Copy of photo identification is attached OR I hereby verify that I am the person named above and these statements made by me on this application are true and correct. Sworn to me before this day of 20 Notary Signature My commission expires Month / Day / Year								
AU	JTHORIZED MESSENGER REQUEST DUE	E TO SICKNESS O	R DISABILITY ONLY	1: The deadline to request	t is 3:00 p.m. o	n Election Day			
	As a registered voter, I authorize Last Name	Firs	t Name		Daytime telep	phone			
8	Address	Apt	. or Lot #	City, State	Z	ip Code			
	to serve as my authorized messenger to pick up my absentee ballot. I further certify under penalty of law that I am confined because of sickness or disability and for this reason alone am unable to vote at my polling place on Election Day.			As the authorized messenger, I acknowledge receipt of the ballot for the above named voter onDate:Time: Are you serving as an authorized messenger for any other voter? YESNO					
	Voter's Signature			Authorized Messenger's Signature					

South Dakota Absentee Ballot Application Form

ABSENTEE VOTING -ID REQUIREMENTS

- **IN-PERSON** ABSENTEE
 - VOTER MUST SHOW PHOTO ID OR COMPLETE PERSONAL ID AFFIDAVIT.
- ABSENTEE BY MAIL
 - ABSENTEE BALLOT APPLICATION FORM MUST BE NOTARIZED OR ACCOMPANIED WITH A COPY OF THEIR PHOTO ID.
- UOCAVA (MILITARY SERVICEMEN, SPOUSE OR DEPENDENT AND OVERSEAS CITIZENS, SPOUSE OR DEPENDENT)
 - ID REQUIREMENTS ARE **WAIVED** FOR ALL VOTERS COVERED UNDER UOCAVA.
 - <u>ONLY</u> UOCAVA VOTERS MAY SUBMIT THEIR ABSENTEE REQUEST BY EMAIL OR FAX.
 - CITIES AND SCHOOLS ARE NOT ABLE TO SEND BALLOTS TO UOCAVA VOTERS ELECTRONICALLY (BY EMAIL).

IN-PERSON ABSENTEE APPLICATION PROCESS

- CHECK VOTER REGISTRATION LIST.
- CONFIRM WITH THE VOTER IF THEY WANT TO VOTE IN-PERSON
 OR IF THEY WANT TO TAKE THE BALLOT WITH THEM. THIS WILL
 SAVE YOU TIME.
- HAVE VOTER FILL OUT COMBINED ABSENTEE BALLOT
 APPLICATION/ENVELOPE.
- VOTER MUST SHOW PHOTO ID OR COMPLETE PERSONAL
 IDENTIFICATION AFFIDAVIT.
- GIVE VOTER THE CORRECT BALLOT.
- UPDATE ABSENTEE VOTER LOG.



SETTING UP YOUR IN-PERSON ABSENTEE VOTING

- HAVE PRIVACY SCREENS SET UP FOR VOTERS
- SET OUT THE APPROPRIATE PENS FOR THE VOTER TO USE
- PLACE THE BALLOT BOX IN A PLACE WHERE THE VOTER CAN PLACE THE BALLOT IN THE BOX OR HAVE IT VIEWABLE SO THEY CAN SEE YOU PLACE THE BALLOT IN THE BOX.
 - DON'T WANT TO LEAVE ANY DOUBTS IN THE VOTER'S MIND THAT THEIR VOTE WON'T COUNT.
- MAKE SURE THE BALLOT BOX IS SECURE AND LOCKED



Application For In-Office Absentee Ballot

5:92:10:01.03 - Combined absentee ballot a	application/return envelope (01/10)	No.0079-0
	APPLICATION FOR IN-OFFICE ABSENTEE	GALLOT
the second second	COUNTY, S	OUTH DAKOTA
My printed name as it appears on the	voter registration list is:	
My voter registration residence addres	ss is:	
	(address)	(city)
	requesting an absentee ballot: ad as an independent and are requesting a primary ballot, you may of the following: Non-political ballot or Democratic Party ball	
General		
Municipal		
School		
Special	(specity (unsolation)	
If request is for a municipal or school e		
I have lived in that jurisdiction at le	east 30 days in the last year. Yes 🗔 No 🗔	
I am a full-time postsecondary stud I am on active duty military and my	dent who resided in that jurisdiction immediately prior to leaving for y home of record is in that jurisdiction. Yes I No I	or posisecondary education. Tes 🔄 No 🗆
I, under penalty of impersonating a reg made by me are true and correct, and	gistered voter (5 years imprisonment and \$10,000 fine), state that that I will vote the ballot which will be enclosed in this envelope.	I am the person named above, these stateme
		Date:
	Voter Signature	L'ONG-
INSTRUCTIONS TO THE VOTER:	Voter Signature	D'uno-
 Mark your ballot privately. 	Voter Signature	Unit
Mark your ballot privately. Do not fold your ballot.		Unit
Mark your ballot privately. Do not fold your ballot. Place your ballot in this envelop	pe and seal it securely.	Unit
Mark your ballot privately. Do not fold your ballot. Place your ballot in this envelop		Dure
Mark your ballot privately. Do not fold your ballot. Place your ballot in this envelop	pe and seal it securely.	Unit

REVIEW THE ABSENTEE VOTING PROCESS DOCUMENT

<u>HTTPS://SDSOS.GOV/ELECTIONS-</u>
 <u>VOTING/ASSETS/ABSENTEEVOTINGPROCESSSCHOOLCITY.PDF</u>



MAIL-IN ABSENTEE VOTING

- THIS PROCESS IS USED FOR **ANY** VOTER WHO WANTS TO VOTE ABSENTEE THROUGH THE MAIL.
- WHEN YOU RECEIVE THE ABSENTEE BALLOT APPLICATION:
 - IS THE PERSON A REGISTERED VOTER?
 - IS THE APPLICATION SIGNED AND COMPLETED?
 - IS THE APPLICATION NOTARIZED, OR SIGNED BY AN OFFICIAL AUTHORIZED TO ADMINISTER OATHS, OR ACCOMPANIED BY A COPY OF A PHOTO ID? <u>THIS STEP IS WAIVED FOR ALL VOTERS</u> <u>COVERED UNDER UOCAVA.</u>
- SEND THE VOTER THE CORRECT BALLOT, INSTRUCTIONS (<u>ARSD</u> 05:02:10:04) AND RETURN ENVELOPE (<u>ARSD 05:02:10:05</u>).
- UPDATE ABSENTEE VOTER LOG (<u>ARSD 05:02:10:06</u>).



ABSENTEE BALLOT PACKET

- CORRECT BALLOT (BALLOT USED ON ELECTION DAY)
- INSTRUCTIONS TO THE VOTER (ARSD 5:02:10:04)
- RETURN ENVELOPE (<u>ARSD 5:02:10:05</u>)
- THERE IS A DIFFERENT RETURN ENVELOPE FOR UOCAVA VOTERS THAT IS POSTAGE PAID (<u>ARSD 5:02:10:08</u>)



UNIFORMED AND OVERSEAS CITIZENS ABSENTEE VOTING ACT (UOCAVA)

- UOCAVA VOTERS INCLUDE:
 - STATESIDE MILITARY MEMBERS (AWAY FROM THEIR SD VOTING RESIDENCE)
 - MILITARY MEMBERS STATIONED OUTSIDE OF THE U.S.
 - OVERSEAS CITIZENS
 - A SPOUSE OR DEPENDENT OF ANY OF THE
 ABOVE



FPCA FEDERAL POST CARD APPLICATION

Voter Registration and Absentee Ballot Request Federal Post Card Application (FPCA)

Print clearly in blue or black ink.

This form is for absent Uniformed Service members, their families, and citizens residing outside the United States. It is used to register to vote, request an absentee ballot, and update your contact information. See your State's instructions at FVAP.gov.

1. Who are you? Pick	one						
I request an absentee ballot for all elections in which I am eligible to vote AND:	I am an activated I am a U.S. citizen I am a U.S. citizen	National Guard r living outside th living outside th	member on State e country, and I e country, and m				
Last name			Suffix (2	Ir., II)			
First name			Previou	s names (if applicable)			
Middle name			Birth da	te (MM/DD/YYYY)	/	/	
Social Security Number	-	-	Driver's	license or State ID #			
2. What is your addre	ss in the U.S. State	or territory w	here you are re	gistering to vote and	l requesting a	n absentee	b
Your voting materials wi	I not be sent to this ad	idress. See instr	uctions on other	side of form.			
Street address				Apt #			
City, town, village				State			
County				ZIP			
3. Where are you now	v? You must give yo	ur CURRENT a	ddress to rece	ive your voting mate	erials.		
Your mailing address. (D	ifferent from above)		Your ma	il forwarding address. ((If applicable)		
4. What is your conta	ct information? This	s is so election	officials can re	ach you about your i	request.		
Provide the country code			ax number. Do no			SN) number.	
Provide the country cod Email:			ax number. Do no Phone:			SN) number.	
Provide the country cod Email: Alternate email:	e and area code with y	our phone and f	ax number. Do no			SN) number.	
Provide the country cod Email: Alternate email: 5. What is your voting	e and area code with y	our phone and f	ax number. Do no Phone: Fax:	ot use a Defense Switch		SN) number.	
Provide the country code Email: Alternate email: 5. What is your voting How do you want to receive voting materials	a and area code with y preference? Select	our phone and f	ax number. Do no Phone: Fax: What is			SN) number.	
Provide the country code Email: Alternate email: 5. What is your votinn How do you want to receive voting materials from your election office	and area code with y preference? Select Mail Mail Fmail or online Fax	our phone and fi	ax number. Do no Phone: Fax: What is	ot use a Defense Switch		SN) number.	
Provide the country code Email: Alternate email: 5. What is your voting How do you want to receive voting materials	and area code with y	t One.	ax number. Do no Phone: Fax: What is for prim	ot use a Defense Switch your political party ary elections? Ind Virginia. (Ex. Proof o	hed Network (D		
Provide the country cod Email: Alternate email: 5. What is your voting How do you want to receive voting materials from your election office 6. What additional in The following need more:	and area code with y	t One.	ax number. Do no Phone: Fax: What is for prim	ot use a Defense Switch your political party ary elections? Ind Virginia. (Ex. Proof o	hed Network (D		
Provide the country cod Email: Alternate email: 5. What is your voting How do you want to receive voting materials from your election office 6. What additional in The following need more:	and area code with y	t One.	ax number. Do no Phone: Fax: What is for prim	ot use a Defense Switch your political party ary elections? Ind Virginia. (Ex. Proof o	hed Network (D		
Provide the country cod Email: Alternate email: 5. What is your voting How do you want to receive voting materials from your election office 6. What additional in The following need more:	and area code with y	t One.	ax number. Do no Phone: Fax: What is for prim	ot use a Defense Switch your political party ary elections? Ind Virginia. (Ex. Proof o	hed Network (D		
Provide the country code Email: Alternate email: 5. What is your wobing How do you want to receive voting materials from your election office 6. What additional in The following need more You may also use this sp	and area code with y	t One. t One. provide? Arizona, Puerto I er information. S	ax number. Do no Phone: Fax: What is for prim	ot use a Defense Switch your political party ary elections? Ind Virginia. (Ex. Proof o	hed Network (D		
Provide the country cod Email: Alternate email: 5. What is your woting How do you want to receive voting materials from your election office 6. What additional in The following need morr You may also use this sp 7. Your must read and I swear or affirm, und The information on this completion of this docu I am a U.S. citzen, at le I am not disqualified to incompletion of the sfocu	and area code with y preference? Select Mail Email or online Sign this statement formation: Alaska, ace to clarify your vob Sign this statement form is true, accurate, a ment may constitute green ast 18 years of age (or vote due to having been y voting rights have bee	t One. I provide? Arizona, Puerto I er information. S ry, that: and complete to It unds for convicti will be by the day te or reinstated; and	AX Number. Do no Phone: Fax: What is for prim Rico, Vermont, ar See the Voting As the best of my kno on of perjury. of the election), e shony or other disg	ot use a Defense Switch your political party ary elections? Ind Virginia. (Ex. Proof o sistance Guide at FVAP wiedge. I understand the ligible to vote in the requ ualifying offense, nor ha	hed Network (D of residency, em gov. at a material mis sested jurisdictio ve I been adjudi	ployer, etc.) statement of n, and cated mentally	y
Provide the country code Email: Alternate email: 5. What is your woting How do you want to receive voting materials from your election office 6. What additional in The following need more You may also use this sp 7. Your must read and I swear or affirm, und The information of this docur I am a U.S. citizen, at le I am not disqualified to	and area code with y preference? Select Mail Email or online Sign this statement formation: Alaska, ace to clarify your vob Sign this statement form is true, accurate, a ment may constitute green ast 18 years of age (or vote due to having been y voting rights have bee	t One. I provide? Arizona, Puerto I er information. S ry, that: and complete to It unds for convicti will be by the day te or reinstated; and	AX Number. Do no Phone: Fax: What is for prim Rico, Vermont, ar See the Voting As the best of my kno on of perjury. of the election), e shony or other disg	ot use a Defense Switch your political party ary elections? In Virginia. (Ex. Proof o sistance Guide at FVAP wledge. I understand the ligible to vote in the requ ualifying offense, nor ha	hed Network (D of residency, em gov. at a material mis sested jurisdictio ve I been adjudi	ployer, etc.) statement of n, and cated mentally	ŗ
Provide the country code Email: Alternate email: S. What is your worth How do you want to receive voting materials from your election office G. What additional in The following need morr You may also use this sp A you must read and I swear or affirm, und The information on this completion of this docu I am a U.S. citzen, at le I am not disqualified to incompetent; or if so, m	and area code with y preference? Select Mail Email or online Sign this statement formation: Alaska, ace to clarify your vob Sign this statement form is true, accurate, a ment may constitute green ast 18 years of age (or vote due to having been y voting rights have bee	t One. I provide? Arizona, Puerto I er information. S ry, that: and complete to It unds for convicti will be by the day te or reinstated; and	AX Number. Do no Phone: Fax: What is for prim Rico, Vermont, ar See the Voting As the best of my kno on of perjury. of the election), e shony or other disg	at use a Defense Switch your political party ary elections? d Virginia. (Ex. Proof o sistance Guide at FVAP wiedge. I understand the igible to vote in the requiralitying offense, nor har nited States, except the Toda	hed Network (D of residency, em gov. at a material mis sested jurisdictio ve I been adjudi	ployer, etc.) statement of n, and cated mentally	,

This information is for official use only. Any unauthorized release may be purishable by law. Previous editions are obsolete

Standard Form 76 (Rev.09-2017), CMB No. 0704-0903

UOCAVA VOTERS

- RETURN ENVELOPE FOR THOSE MILITARY (STATESIDE OR OVERSEAS) AND OVERSEAS CITIZEN VOTERS (RESIDING OUTSIDE OF THE U.S.) MUST BE IN THIS FORMAT (05:02:10:08) WHICH PROVIDES FREE POSTAGE FOR THOSE VOTERS TO RETURN THEIR VOTED ABSENTEE BALLOT TO YOU.
 - THE POSTAGE IS FREE IF MAILED IN A U.S. POSTAL SYSTEM.
 - IF MAILED IN A NON-U.S. POSTAL SYSTEM THE VOTER WILL HAVE TO PAY THE POSTAGE.

NAME AND COMPLETE ADD		US POSTAGE PAID 39 USC 3406 PAR AVION
	OFFICIAL ABSENTEE BALLOTING MATERIAL - FIRST-CLASS MAIL NO POSTAGE NECESSARY IN THE U.S. MAIL - DMM 703.8.0 TO:	•

OTHER ABSENTEE PROVISIONS

- ABSENTEE <u>APPLICATION</u> MUST BE RECEIVED BY 5:00 P.M. THE DAY BEFORE THE ELECTION.
- ONE APPLICATION MAY APPLY TO ALL ELECTIONS IN THE CALENDAR YEAR IF THE VOTER HAS INDICATED THAT.
 - IF THE VOTER'S ABSENTEE BALLOT MAILING ADDRESS CHANGES, THE VOTER MUST SUBMIT A NEW ABSENTEE BALLOT APPLICATION.
 - IF YOU RECEIVE AN APPLICATION FOR OTHER ELECTIONS MAKE SURE TO GIVE A COPY OF THE APPLICATION TO THE OTHER JURISDICTIONS.
 - MAKE SURE THE COUNTY AUDITOR HAS THE CORRECT EMAIL TO SEND ABSENTEE BALLOT APPLICATIONS TO YOU. THE VOTER SYSTEM THAT THE AUDITORS USE, WILL AUTOMATICALLY FORWARD THE APPLICATION TO YOU IF THE VOTER REQUESTED BALLOTS FOR CITY AND/OR SCHOOL ELECTIONS.

OTHER ABSENTEE PROVISIONS CONT'D

- A VOTER CANNOT USE A POWER OF ATTORNEY TO SIGN THE APPLICATION FOR THEM. A VOTER HAS TO MAKE SOME SORT OF MARK PER <u>SDCL 2-14-2 (25).</u>
 - AN INDIVIDUAL IS ALLOWED TO ATTEST TO THE MARK BY WRITING THE VOTER'S NAME AND THEN THE INDIVIDUAL SIGNS AND PRINTS THEIR OWN NAME INDICATING THEY WERE A WITNESS TO THE VOTER MAKING A MARK.
- IF AN ABSENTEE VOTER DIES BEFORE ELECTION DAY, THE BALLOT IS NOT PROCESSED OR COUNTED, THE BALLOT ENVELOPE MUST BE PULLED, NOT OPENED AND NOT COUNTED. WRITE ON THE ENVELOPE "UNOPENED BY REASON OF DEATH OF VOTER."
- INACTIVE VOTERS MUST COMPLETE A NEW REGISTRATION FORM BEFORE VOTING ABSENTEE.
 - HAVE THE VOTER FILL OUT THE FORM AND MAIL IT BACK <u>SEPARATELY</u> FROM THEIR BALLOT OR ELSE THE BALLOT MAY NOT BE COUNTED.

ABSENTEE BALLOT PROCESSING

- ELECTION BOARD WILL PROCESS ABSENTEE BALLOTS AT THE POLLING PLACE WHENEVER THEY HAVE TIME DURING THE ELECTION DAY OR IMMEDIATELY AFTER THE POLLS CLOSE.
- NO ABSENTEE BALLOT MAY BE ACCEPTED AFTER THE POLLS CLOSE.



ABSENTEE BALLOT PROCESSING AT POLLING LOCATION

- PROCESSING:
 - COMPARE THE SIGNATURE ON THE BALLOT ENVELOPE WITH THE SIGNATURE ON THE APPLICATION, EXCEPT COMBINED APPLICATION/RETURN ENVELOPE WILL HAVE NO SIGNATURES TO COMPARE.
 - MARK THE REGISTRATION LIST AND ENTER THE NAME IN THE POLLBOOK.
 - OPEN THE ENVELOPE AND PLACE THE OFFICIAL BALLOT STAMP ON THE BALLOT AND PLACE THE BALLOT IN THE BALLOT BOX.

AUTHORIZED MESSENGER

- WHO CAN USE AN AUTHORIZED MESSENGER?
 - A VOTER WHO IS <u>CONFINED BECAUSE OF SICKNESS OR</u> <u>DISABILITY.</u>
 - WORK IS NOT CONSIDERED CONFINEMENT. EMPLOYERS ARE REQUIRED UNDER LAW TO ALLOW AN EMPLOYEE UP TO 2 HOURS TO BE ABSENT TO VOTE (SDCL 12-3-5).
- VOTER DESIGNATES ON THE APPLICATION FOR SOMEONE TO BRING THEM A BALLOT.
- IF A NURSING HOME REQUESTS THAT YOU BRING BALLOTS TO THE RESIDENTS TO VOTE ABSENTEE, YOU ARE NOT ALLOWED UNDER LAW TO DO SO. (SDCL 12-19-9.1)



AUTHORIZED MESSENGER CONT'D

- A <u>CANDIDATE</u> FOR ANY ELECTIVE OFFICE CANNOT BE AN AUTHORIZED MESSENGER (<u>SDCL 12-19-7.1</u>).
- NO AUTHORIZED MESSENGER MAY, IN THE PRESENCE OF THE VOTER AT OR BEFORE THE TIME OF VOTING, DISPLAY CAMPAIGN POSTERS, SIGNS OR OTHER CAMPAIGN MATERIALS OR BY ANY LIKE MEANS SOLICIT ANY VOTES FOR OR AGAINST ANY PERSON, POLITICAL PARTY OR POSITION ON A QUESTION SUBMITTED. A VIOLATION OF THIS SECTION IS A CLASS 2 MISDEMEANOR (SDCL 12-19-7.2).
- IF A PERSON IS AN AUTHORIZED MESSENGER FOR MORE THAN ONE VOTER, HE MUST NOTIFY THE PERSON IN CHARGE OF THE ELECTION OF ALL VOTERS FOR WHOM HE/SHE IS A MESSENGER (SDCL 12-19-2.2).

