

5:02:03:12. Agency voter registration instructions. The declination form and instructions provided with each voter registration form used by an agency which provides food stamps; temporary assistance for needy families (TANF); the women, infants, and children nutrition program (WIC); military recruitment; or assistance to the disabled as provided by the Department of Human Services must be in the following form:

SOUTH DAKOTA AGENCY VOTER REGISTRATION FORM

If you are (bold) **not registered** (unbold) ~~to vote where you live now~~ to vote where you live now (unbold), would you like to apply to register to vote here today? Yes _____ No _____

If you do not check either box, you will be considered to have decided not to register to vote at this time.

If you register to vote, the information regarding the office to which the ~~application~~ voter registration form was submitted will remain confidential and be used only for voter registration purposes.

If you don't register to vote, this decision will remain confidential and be used only for voter registration purposes.

If you would like help filling out the voter registration ~~application~~ form, we will help you. The decision whether to seek or accept help is yours. You may fill out the ~~application~~ form in private.

If you believe that someone has interfered with your right to register or to decline to register to vote, your right to privacy in deciding whether to register or in applying to register to vote, or your right to choose your own political party or other political preference, you may file a complaint with the Secretary of State, 500 E. Capitol, Pierre, SD 57501, 605-773-3537.

Applying to register or declining to register to vote will not affect the amount of assistance that you will be provided by this agency.

To register, please complete the entire voter registration ~~card~~ form by printing the requested information. If you are currently registered to vote, please also fill out the ~~attached cancellation card~~ previous voter registration information at the bottom of the form. Return the voter registration ~~card~~ form to the county auditor in your county of residence or to your local TANF, food stamp, WIC, military recruitment, or Department of Human Services office. (bold) **The deadline for registration is 15 days before any election.** (unbold)

Source: 21 SDR 77, effective October 24, 1994; 23 SDR 115, effective January 22, 1997; 29 SDR 177, effective July 2, 2003; 31 SDR 214, effective July 4, 2005.

General Authority: SDCL 12-4-35.

Law Implemented: SDCL 12-4-2.

5:02:03:20. Potential duplicate notice. The mailing notice sent to potential duplicates by forwardable mail to confirm voter registration information must contain the following information:

Voter Registration Information

(postage)

(List voter's name, complete mailing

address, complete residence address, _____

political party, ward, precinct, school _____

district, county commission district, _____, SD _____

legislative district, water district,

township, and ~~location of precinct~~

~~polling place~~ visit sdsos.gov to find your voting location.)

If this information is correct and you wish

to remain registered to vote, please check

Forwarding Service Requested

the first box, sign below, tear off this

or Address Service Requested

preaddressed and prepaid card and mail.

If this is not correct, please see reverse

side for instructions.

(bold) **You must check one:** (unbold)

☐ I certify that the above information
is correct or has been corrected and
that I am not registered at any other
address; or

☐ I certify that I have registered elsewhere (Voter's Name)

or cancel my registration. (Voter's Address)

(Voter's City, State, Zip)

Date _____

Voter Signature _____

The reverse side shall be in the following form:

Potential Duplicate Voter Registration Notice

1. Your voter registration has been identified as a possible duplicate voter registration in South Dakota. Please follow these instructions to confirm the validity of this voter registration.
2. If you are not registered at any other address, the information on the reverse side is correct and you wish to remain registered to vote, please check the first box, sign, tear off, and return the attached card.
3. If any of this information is not correct, please check the first box, make the appropriate changes, sign, tear off, and return the attached card. Your voter registration will be changed to reflect the information which you provide.

(Postage Prepaid)

(County Auditor's Address)

4. (bold) **If this card is not returned within 30 days,**
your voter registration will become inactive. (unbold)

With an inactive registration you will be able to vote

by signing an affirmation of current address at your polling place.

5. If this card is not returned within 30 days and you do not vote by the second general election from today, your registration will be canceled.

6. If you have registered to vote elsewhere, please check the second box, sign, and return.

Source: 28 SDR 99, effective January 17, 2002; 36 SDR 112, effective January 11, 2010.

General Authority: SDCL 12-1-9(1).

Law Implemented: SDCL 12-4-40.

CHAPTER 5:02:03
FORMS FOR REGISTRATION

Section

| | |
|-----------------------------|---|
| 5:02:03:00 | Repealed. |
| 5:02:03:01 | Voter registration form. |
| 5:02:03:01.01 to 5:02:03:11 | Repealed. |
| 5:02:03:12 | Agency voter registration instructions. |
| 5:02:03:13 | Voter registration instructions. |
| 5:02:03:14 | Acknowledgement notice for invalid or incomplete voter registration applications. |
| 5:02:03:15 | Acknowledgement notice for valid voter registrations. |
| 5:02:03:16 | Confirmation mailing notice. |
| 5:02:03:17 | Retention of confirmation mailing notice records. |
| 5:02:03:18 | Voter registration statistics. |
| 5:02:03:19 | Voter registration address verification notice. |
| 5:02:03:20 | Potential duplicate notice. |
| 5:02:03:21 | Statement by person registering without a driver license or social security number. |
| 5:02:03:22 | Parameters for voter registration verification with driver license records. |
| 5:02:03:23 | Parameters for voter registration verification with social security administration records. |
| 5:02:03:24 | Notice to removed felons. |
| <u>5:02:03:25</u> | <u>Overseas registrant form.</u> |

5:02:03:25. Overseas registrant form. The overseas voter registrant form shall be in the following format and contain the following information:

South Dakota Overseas Registrant Form

I, _____ (print complete name), registering to vote as the adult child of an overseas citizen declare that:

- I am an adult child of an overseas citizen who was last domiciled in South Dakota immediately prior to departure from the United States of America;
- I have never resided in the State of South Dakota;
- I do not maintain a domicile, am not registered to vote, and am not voting in any other state;
- I have not reached the age of 22 years;
- A photocopy of my United States passport identification page accompanies this form;
- My voter registration form accompanies this form; and
- My parent, who is an overseas citizen, is registered to vote in South Dakota with the following name and address:

Parent name

Address _____ City _____ State _____ Zip Code

I declare and affirm under the penalties of perjury that this information has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.

Voter Signature

Date

General Authority: SDCL 12-1-9(1)

Law Implemented: SDCL 12-4-4.11

5:02:04:18. Notice of statewide secondary election. The notice of the statewide secondary election shall be in the following form:

NOTICE OF SECONDARY ELECTION

STATE OF SOUTH DAKOTA

Because no candidate for _____ received the required thirty-five percent of the vote in the primary election held on June _____, _____, a secondary election will be held on Tuesday, ~~June~~ August _____, _____, in each county in the state. The polling places will be the same as those used in the primary election, and the polls will be open from seven a.m. to seven p.m. _____ (mountain or central daylight savings) time.

The candidates for nomination for _____, as determined by the official state canvass, are

Secretary of State, South Dakota

Source: 12 SDR 43, effective September 23, 1985; 29 SDR 113, effective January 30, 2003.

General Authority: SDCL 12-1-9(3).

Law Implemented: SDCL 12-6-51.1, 12-12-1.

5:02:05:21. Affirmation of inactive voter's address. The form to affirm an inactive voter's current address is the voter registration ~~card~~ form prescribed in § 5:02:03:01.

Source: 21 SDR 77, effective October 24, 1994; 23 SDR 115, effective January 22, 1997.

General Authority: SDCL 12-4-35.

Law Implemented: SDCL 12-18-7.4.

5:02:06:17. Ballot for statewide secondary election. The ballot for a statewide secondary election shall be in the same form prescribed in 5:02:06:10. The form may only include the races to be voted upon. The heading shall state “OFFICIAL SECONDARY ELECTION BALLOT”.~~must have a blue indicator for the Democratic Party and white for the Republican Party and must be in the following form if applicable:~~

_____ **PARTY**
OFFICIAL SECONDARY ELECTION BALLOT
_____ **COUNTY, SOUTH DAKOTA**
June _____, **20** _____

~~To vote use a cross (X) or a check mark (T) in the square in front of the name. DO NOT cast more votes than are allowed in each race.~~

~~For United States Senator, you may vote for one or leave it blank~~

☐ _____
☐ _____

~~For United States Representative, you may vote for one or leave it blank~~

☐ _____
☐ _____

~~For Governor, you may vote for one or leave it blank~~

☐ _____
☐ _____

Source: 12 SDR 43, effective September 23, 1985; 25 SDR 8, effective August 3, 1998; 28 SDR 99, effective January 17, 2002; 29 SDR 177, effective July 2, 2003; 32 SDR 225, effective July 3, 2006.

General Authority: SDCL 12-1-9(2).

Law Implemented: SDCL 12-6-51.1.

CHAPTER 5:02:10

ABSENTEE VOTING

Section

- 5:02:10:01 Application for absentee ballot.
- 5:02:10:01.01 Receipt for absentee ballot.
- 5:02:10:01.02 Guidelines for acceptance of facsimile absentee ballot applications from UOCAVA voters.
- 5:02:10:01.03 Combined absentee ballot application/return envelope.
- 5:02:10:01.04 ~~Military and overseas voters absentee ballot application for electronic access~~
Repealed.
- 5:02:10:02 Envelope for transmitting ballot application to superintendent of elections.
- 5:02:10:03 Envelope for sending ballots to voter.
- 5:02:10:04 Instructions to absentee voters.
- 5:02:10:05 Official return envelope for ballots used in voting.
- 5:02:10:06 Official record of absentee ballots delivered to voters.
- 5:02:10:07 Repealed.
- 5:02:10:08 Envelopes for use with voting service and overseas ballots.

5:02:10:01. Application for absentee ballot. The application for an absentee ballot must be in the following form:

~~APPLICATION FOR ABSENTEE BALLOT~~

~~_____ COUNTY, SOUTH DAKOTA~~

~~You may apply for an absentee ballot before 3:00 p.m. on election day for any or all primary, general, or special elections conducted by your county in this calendar year with one request. However, you must make a separate request for municipal elections and another for school elections. Additional information on absentee voting is available at www.sdsos.gov.~~

~~Check the election(s) for which you are requesting an absentee ballot:~~

~~G Primary — If you are registered as an independent and are requesting a primary ballot, you may have a choice of ballots. Please check one of the following: G Non-political ballot or G Democratic Party ballot~~

~~G General~~

~~G Municipal~~

~~G School~~

~~G Special _____ (specify jurisdiction)~~

~~G If any other election is conducted by this jurisdiction this calendar year, I request an absentee ballot for that election.~~

~~If request is for a municipal or school election:~~

~~I have lived in that jurisdiction at least 30 days in the last year. Yes ☐ No ☐~~

~~I am a full-time postsecondary student who resided in that jurisdiction immediately prior to leaving for postsecondary education. Yes ☐ No ☐~~

~~I am on active duty military and my home of record is in that jurisdiction. Yes ☐ No ☐~~

~~Are you in the Military or Uniformed Services, a Spouse or Dependent of the same, or an Overseas Citizen? Yes ☐ No ☐~~

~~Are you currently living in the United States? Yes ☐ No ☐~~

~~My printed name as it appears on the voter registration list is: _____~~

~~My voter registration residence address is: _____~~

~~_____ Address _____ City~~

~~Mail my ballot to the following address _____~~

~~_____ Street Address or PO Box _____ City _____ State _____ Zip~~

~~Daytime phone number: _____~~

~~NOTE: The voter's signature must be witnessed by a notary public or other officer authorized to administer an oath. If the signature is not witnessed, this application must be accompanied by a copy of the voter's valid ID. If you are living outside the United States, these requirements do not apply.~~

~~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 government • A tribal photo ID • A current student photo ID issued by a South Dakota high school or postsecondary education institution.~~

~~I hereby verify that I am the person named above and these statements made by me on this application are true and correct _____~~

~~_____ Voter Signature~~

~~Sworn to before me this _____ day of _____, 20____.~~

~~_____ (Seal) _____~~

~~_____ Signature of Officer Administering Oath~~

~~My Commission Expires _____~~

~~_____ Title of Officer Administering Oath~~

AUTHORIZED MESSENGER REQUEST ONLY

I authorize _____ 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.

Signature of voter

THE AUTHORIZED MESSENGER MUST COMPLETE THE FOLLOWING:

Name: _____ Phone: _____

Address: _____

Are you serving as an authorized messenger for any other voter? Yes ☐ No ☐

I acknowledge receipt of the ballot for the above named voter on _____ at _____ m.

Date Time

Date Ballot Returned: _____

Signature of Authorized Messenger



South Dakota
Absentee Ballot Application Form
_____ County

| | | | |
|---|---|--|---|
| Please print and return to your county auditor. A new application must be completed 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 | First Name | Middle Name(s)/Initial |
| 2 | Voter registration address | Apt. or Lot # | City, State |
| 3 | Absentee ballot mailing address (if different from section #2) | | City, State |
| | | | Zip Code |
| SELECT THE ELECTION(S) YOU ARE REQUESTING AN ABSENTEE BALLOT FOR: | | | |
| 4 | All <input type="checkbox"/> General <input type="checkbox"/> Primary <input type="checkbox"/> Municipal <input type="checkbox"/> School <input type="checkbox"/> Any Other <input type="checkbox"/> | | |
| | If you are registered as an independent and are requesting a Primary Election ballot, you may have a choice of the following: Democratic <input type="checkbox"/> Non-Political <input type="checkbox"/> | | |
| 5 | 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 <input type="checkbox"/> No <input type="checkbox"/> I am a full-time student who resided in that jurisdiction prior to leaving. Yes <input type="checkbox"/> No <input type="checkbox"/> | |
| MILITARY AND OVERSEAS CITIZENS ONLY: | | | |
| 6 | Are you in the Military or Uniformed Services, a spouse or dependent of the same or an Overseas Citizen? Yes <input type="checkbox"/> No <input type="checkbox"/> If you checked yes, complete this section. If you checked no, proceed to section #7. If you want your ballot sent electronically instead of first class mail, provide your e-mail address below: | | |
| | *Stateside military voters are required to submit a photocopy of their ID or have this application notarized. | | |
| | *The notarization of this application can be administered by any commissioned officer in the United States military. | | |
| | *Overseas military and overseas citizen voters are not required to submit a photocopy of their ID. | | |
| | *All military and overseas voters may submit your 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 government, a tribal photo ID, or a current student photo ID issued by a South Dakota high school or postsecondary education institution. <input type="checkbox"/> Copy of photo identification is attached OR <input type="checkbox"/> 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 before me this _____ day of _____, 20____. (Seal) Notary signature _____ Date: _____/_____/_____ My commission expires _____ Month / Day / Year | | |
| | Voter's Signature Required | | |
| AUTHORIZED MESSENGER REQUEST DUE TO SICKNESS OR DISABILITY ONLY: The deadline to request is 3:00 p.m. on Election Day. | | | |
| As a registered voter, I authorize... | | | |
| | Last Name | First Name | Daytime telephone |
| | Address | Apt. or Lot # | City, State |
| | | | Zip Code |
| 8 | ...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 on... Date: _____ Time: _____ Are you serving as an authorized messenger for any other voter? Yes <input type="checkbox"/> No <input type="checkbox"/> |
| | Voter's Signature | | Authorized Messenger's Signature |

09/01/2013

Source: 2 SDR 46, effective December 30, 1975; 6 SDR 25, effective September 24, 1979; 8 SDR 24, effective September 16, 1981; 10 SDR 27, effective September 26, 1983; 16 SDR 20, effective August 10, 1989; 16 SDR 203, effective May 28, 1990; 19 SDR 12, effective August 5, 1992; 21 SDR 77, effective October 24, 1994; 23 SDR 115, effective January 22, 1997; 23 SDR 236, effective July 17, 1997; 25 SDR 8, effective August 3, 1998; 25 SDR 167, effective July 6, 1999; 29 SDR 177, effective July 2, 2003; 32 SDR 109, effective December 26, 2005; 32 SDR 225, effective July 3, 2006; 36 SDR 112, effective January 11, 2010; 36 SDR 209, effective June 30, 2010.

General Authority: SDCL 12-1-9(4), 12-19-2.

Law Implemented: SDCL 9-13-4.1, 12-18-6.1, 12-19-2, 12-19-2.1, 12-19-2.2, 13-7-4.2.

5:02:10:01.04. Military and overseas voters absentee ballot application for electronic access. ~~The application for electronic access to an absentee ballot by a military or overseas voter must be in the following form:~~

~~MILITARY AND OVERSEAS VOTERS ABSENTEE BALLOT APPLICATION~~

~~_____ COUNTY, SOUTH DAKOTA~~

~~REQUEST FOR ELECTRONIC ACCESS~~

~~As a military or overseas voter, you may apply for electronic access to your absentee ballot before 3:00 p.m. on Election Day for any or all primary, general, or special elections conducted by your county in this calendar year with one request. Additional information on absentee voting is available at www.sdsos.gov.~~

~~Check the election(s) for which you are requesting an absentee ballot:~~

~~☐ Primary — If you are registered as an independent and are requesting a primary ballot, you may have a choice of ballots. Please check one of the following: ☐ Non Political ballot or ☐ Democratic Party ballot~~

~~☐ General~~

~~☐ Special _____~~

~~☐ If any other election is conducted by this jurisdiction (specify jurisdiction _____) this calendar year, I request an absentee ballot for that election.~~

~~Are you in the Military or Uniformed Services, a Spouse or Dependent of the same, or an Overseas Citizen? Yes ☐ No ☐~~

~~(If you answer "No", do not proceed with the Military and Overseas Voters Absentee Ballot Application. Complete the Application for Absentee Ballot.)~~

~~Are you currently living in the United States? Yes ☐ No ☐~~

My printed name as it appears on the voter registration list is: _____

My voter registration address is: _____

_____ Address _____ City

If you want your ballot sent electronically instead of first class mail, provide your email address:

- | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | -

Please provide your mailing address. Should electronic delivery of your absentee ballot not be possible because the email address is returned undeliverable, your ballot will be forwarded by first class mail.

_____ Street Address or PO Box _____ City _____ State _____ Zip _____ Country

Contact phone number: _____

NOTE: As a military or overseas voter, you may submit your signed application for absentee ballot by fax or email. County Auditor contact information is available at www.sdsos.gov. A new absentee ballot application must be submitted for each calendar year, with the elections for which an absentee ballot is requested being indicated.

Stateside military voters are **required** to submit a photocopy of their ID (listed below) with their absentee ballot application. The ID requirement is waived only for overseas voters, which includes overseas military and overseas citizens. Should notarization of the stateside military voter's signature be easier to obtain than a photocopy of the ID, a notarized absentee ballot application may be submitted. The notarization on the absentee ballot application can be administered by any commissioned officer in the military service of the United States, as per SDCL 18-3-2.

~~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 government • A tribal photo ID • A current student photo ID issued by a South Dakota high school or postsecondary education institution.~~

~~I hereby verify that I am the person named above and these statements made by me on this application are true and correct~~_____

Voter Signature

Sworn to before me this _____ day of _____, 20_____.

(Seal)

Signature of Officer Administering Oath

My Commission Expires _____

Title of Officer Administering Oath

Date Ballot Returned _____

Repealed.

Source: 36 SDR 209, effective June 30, 2010.

General Authority: ~~SDCL 12-1-9(4), 12-19-2.~~

Law Implemented: ~~SDCL 12-18-6.1, 12-19-2, 12-19-2.1, 12-19-2.2.~~