



ELECTIONS DEPARTMENT
 Confederated Tribes of the Colville Reservation
AUTOMATIC ABSENTEE REQUEST



This form will allow you to receive ballots through the mail for every election and referendum held for the Colville Confederated Tribes. Fill out the required fields below to be added to the Automatic Absentee List.

Please circle your Voting District below:

OMAK

INCHELIUM

NESPELEM

KELLER

Current mailing address:

Full Name _____

Tribal ID #: _____

P.O Box/Street Address _____

Date of Birth: _____

City/State/Zip Code _____

Phone # _____

- Please Note:
- 1. Request will remain in effect until a written request to cancel is received.
 - 2. A new request is required if voting district changes.
 - 3. This request will cancel if ballot is undeliverable.

SIGNATURE: _____

Date: _____

RETURN TO: Elections Department
 P.O Box 1150, Nespelem, WA 99155

PHONE: (509) 634-2121
 FAX: (509) 634-2152

OFFICE USE ONLY:

_____ New Voter

_____ Voting Member verified

Date Received: _____

_____ Address Verified

Election Staff: _____

_____ Voting District Verified

Date Entered: _____

_____ Signature Verified

Date Filed: _____

Notes:

