

# CITY AND BOROUGH OF SITKA

2026 ABSENTEE BALLOT REQUEST / BY MAIL, EMAIL or FAX  
**For the October 6, 2026, Municipal Election**



<b>1. VOTER QUALIFICATIONS (Check ALL that apply)</b>				
<input type="checkbox"/> I am a citizen of the United States. <input type="checkbox"/> I am at least 18 years of age or older. <input type="checkbox"/> I have been a resident of the Municipality for at least 30 days immediately prior to the election. <input type="checkbox"/> I am registered to vote in state elections at a residence address within the City and Borough of Sitka.				
<b>2. VOTER INFORMATION</b>				
LAST NAME:		FIRST NAME:		MI:
Provide your <b>PHYSICAL RESIDENCE ADDRESS</b> in the City and Borough of Sitka, do NOT use a P.O. Box.				
PHONE NUMBER:			EMAIL:	
<b>3. IDENTIFIER – You MUST complete ONE of the following:</b>				
VOTER NUMBER:	OR	DATE OF BIRTH:	OR	LAST 4 DIGITS OF SSN:
<b>4. CHECK ONE: How do you want your ballot sent?</b>				
<input type="checkbox"/> <b>BY MAIL - Mail my ballot to this address:</b>			<input type="checkbox"/> <b>BY EMAIL – Email my ballot to:</b>	
CITY:	STATE:	ZIP:	<input type="checkbox"/> <b>BY FAX - Fax my ballot to this number:</b>	
<b>5. VOTER CERTIFICATION - Read and sign below:</b>				
I affirm that I am a qualified voter of the City and Borough of Sitka, Alaska, and that I am not seeking to vote in any other manner in this election.				
If I am choosing to vote my ballot by email or fax, I understand that I give up my right to privacy of that vote.				
VOTER'S SIGNATURE: _____				DATE: _____

**If you request your ballot to be sent by mail, this completed application must be received by the Municipal Clerk's office no later than 5:00 p.m. Alaska Time on September 29, 2026.**

**Please mail, email, fax, or hand-deliver this completed form to:**

Municipal Clerk's Office  
 City and Borough of Sitka (3<sup>rd</sup> Floor if hand-delivering)  
 100 Lincoln Street, Suite 306, Sitka AK 99835  
 Email: [clerk@cityofsitka.org](mailto:clerk@cityofsitka.org)

FOR OFFICE USE ONLY – Date and Initial				
Precinct Registration: <input type="checkbox"/> <b>PRECINCT 1 (02-765)</b> <input type="checkbox"/> <b>PRECINCT 2 (02-770)</b>  <b>Voter ID:</b>	Application Received:	Verified Registration in VREMS:	Data entry in Excel:	Data entry VERIFIED in Excel: