

APPLICATION FOR DISABLED VOTER'S IDENTIFICATION CARD

State of Illinois }
County of DeKalb } SS.
City of _____ }

FOR ELECTION AUTHORITY USE
Precinct/Voter Code: _____ / _____
Voter I.D. # _____
Application received: _____ / _____ / _____
Card No.: _____

To the County Clerk of DeKalb County

I, _____, do solemnly swear (or affirm) that I reside

at _____ in _____
(Address) (City, Village, Township, etc.)

Precinct Number _____ and am registered and fully qualified to vote from said address: that I am

(CHECK THE APPROPRIATE BOX)

(1) A holder of an **Illinois Disabled Person Identification Card** which indicates Class 1A or Class 2 disability. (NOTE; PHYSICIAN'S AFFIDAVIT NOT REQUIRED)

Class 1 or 2 disability # _____

(2) Permanently Disabled **(NOTE; PHYSICIAN'S AFFIDAVIT REQUIRED)**

(3) Senior mobility (NOTE; PHYSICIAN'S AFFIDAVIT NOT REQUIRED)

Due to the nature of the disability, I am incapable of being present at the polls to vote at any election to be held within my election district. I hereby make application for the appropriate Voter Identification Card.

Address to which card/application is to be mailed:

(Signature of Applicant)

(Name of Applicant)

Telephone #:(_____) _____

Date: _____

(County Seal)

(Signature of Election Official)

(See second page for physician's affidavit)

AFFIDAVIT OF ATTENDING PHYSICIAN

State of Illinois }
County of DeKalb } SS.
City of _____}

I, _____, do solemnly swear (or affirm) that I am a physician, duly
(Name of Physician)

licensed to practice in the State of _____ that I have examined _____

and that I believe he/she is permanently incapable of being present at the polls for the following reasons:

Under penalties as provided by law pursuant to 10 ILCS 5/29-10, the undersigned certifies that the statements set forth in this certification are true and correct.

_____/_____/_____
(Date Licensed)

(Signature of physician)

<p>Subscribed and sworn to (or affirmed) by _____ <i>(Name of Physician)</i></p> <p>before me, on ____/____/____</p> <p>_____ Notary Public Signature</p> <p>(SEAL)</p>
