

Submit by email to voting@electionspei.ca
Place your Drivers Licence / Voluntary ID
Number in this space and take a picture of the
ID on the form to return to Elections PEI for
processing,

or

Write down your Driver's Licence/Voluntary ID #

MAIL-IN BALLOT APPLICATION



MUNICIPALITY: _____

WARD: _____

LAST NAME	_____	FIRST & INITIAL	_____	PHONE	_____
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PROPERTY ADDRESS

CIVIC NO.	_____	STREET NAME	_____	APT#	_____
MUNICIPALITY	_____	POSTAL CODE	_____	EMAIL	_____

☐ PLEASE SEND MY BALLOT TO THE ADDRESS LISTED ABOVE

☐ PLEASE SEND MY BALLOT TO THE ADDRESS LISTED BELOW

CIVIC NO.	_____	STREET NAME	_____	APT#	_____
MUNICIPALITY	_____	COUNTRY	_____	POSTAL OR ZIP CODE	_____
PHONE	_____				

**FEDEX CAN ONLY DELIVER A MAIL IN BALLOT TO A CIVIC ADDRESS. POST OFFICE BOX (POBOX) NOT ACCEPTED.
IF YOUR MAIL-IN BALLOT APPLICATION IS ACCEPTED YOU MAY NOT VOTE IN ANY OTHER MANNER**

DECLARATION - I DECLARE:

- I WILL BE AT LEAST 18 YEARS OF AGE ON THE DATE OF THE ELECTION;
- I AM A CANADIAN CITIZEN ON OR BEFORE ORDINARY POLLING DAY;
- I HAVE LIVED IN THE PROVINCE FOR SIX MONTHS IMMEDIATELY PRECEDING ELECTION DAY; and
- I AM AN ORDINARY RESIDENT IN THE WARD OF THIS MUNICIPALITY ON ELECTION DAY.

SIGNATURE:

DATE:

Return your Mail In Ballot Application by mail, in person or by email

PHYSICAL & MAILING ADDRESS

CHIEF ELECTORAL OFFICER OF PEI
ELECTIONS PEI
176 GREAT GEORGE ST. SUITE 160
CHARLOTTETOWN, PEI, CIA 4K9

EMAIL

voting@electionspei.ca

PHONE (902)368-5895

TOLL FREE 1-888-234-8683

OFFICE USE ONLY

MUNICIPALITY: _____

WARD# _____

DATE RECEIVED: _____

ELECTIONS PEI OFFICIAL: _____