



Military or Overseas Absentee Ballot Program Opt-Out Form (ABM--M&O-OPT)

QUESTIONS? - Call your parish Registrar of Voters Office or call the Secretary of State at 1-800-883-2805 or (225) 922-0900.

If you are currently enrolled in the military or overseas absentee ballot program and receive an absentee ballot for every eligible election in Louisiana, you may cancel your enrollment in this program early by using this form. *(Please note that the Military and Overseas Absentee Ballot Program is valid for at least a one year period, including one regularly scheduled federal general election, from the date of the application.)* You must fill out all the required fields as marked below.

You can mail or hand deliver your signed form to your parish Registrar of Voters Office (contact information is available by phone or online at www.GeauxVote.com).

Your name as listed on your Louisiana voter registration

Last name (required)

First name (required)

Middle name

Your Louisiana residence address as shown on your last voter registration card

Complete residence address (required)

Street address (Not a P.O. Box)

Apt. or Unit

City or Town

ZIP Code

Parish

Your identifying information

Birthdate (required) (MM/DD/YYYY)

Mother's Maiden Name (if known)

Enter your Louisiana Driver's License or ID card number; if you do not have one, provide the last four digits of your SSN (optional):

Your Louisiana Driver's License or ID card number: _____

The last four digits of your Social Security number: _____

Sign or mark below

Affirmation: I affirm that the information provided above is true and accurate, and I hereby request to be removed from the automatic military or overseas absentee ballot program, effective the date that this form is received by the Registrar of Voters Office. I understand and confirm that I will no longer automatically receive an absentee ballot unless I reenroll into the program.

SIGN HERE PLEASE! 

Signature or Mark (required)

Date (required)

If you are unable to sign, you must make a mark and have two witnesses to the mark sign below:

OFFICIAL USE ONLY BY REGISTRAR OF VOTERS

Received Date _____ Received by _____ Voter Registration Number _____