Request to Inspect Vote-By-Mail Ballots

certificates on vote	ess to inspect ballot materials e-by-mail envelopes, cure affi and corresponding originals.	•	•
Check the applica	able authorization category	/ :	
Candidate	Political Committee	Official Politica	l Party Official
areas. ONLY ONE P		andidate, Political Party	
_	=		ng Board Timeline published following days: (Check all
3/6/2024	3/8/2024	3/13/2024	3/15/2024
Requestor's Name): 		
Email Address:		Phone #:	
the above mention Signature I also designa	person authorized by Sectioned vote-by-mail materials. te the following person acting	Da	tatutes, to access and review
Name:			
Title: Email Address:		Phone #:	
	npleted form to: info@gadsde		
This form must b would like to insp	e received by the Supervis pect.	or of Elections by noo	n on the day before you
To Be Completed By	Elections Office Staff:		
Date Request Recei	ved:		
SOE Approval:			Date: