

ABSENTEE BALLOT REQUEST

Return Form to Recording Secretary via U.S. mail to:

Stevenson Mader
228 Moon Clinton Rd.
Moon Twp. PA 15108

Date _____

Or hand to Recording Secretary IN PERSON

Stevenson B. Mader, Recording Secretary, Local Lodge 1976, I hereby request an absentee ballot.

(Please Print)

Name

Address

City _____

Zip Code _____

Card Number _____ I.A.M. Job Classification _____

Reason (Check only one (1) as applicable)

Reside more than 25 Miles from voting place. _____

Vacation _____

Confined Due to verified illness _____

I.A.M. Business (authorized) _____

Employer Travel Assignment _____

Military Leave _____

Family Leave _____

Signature _____

228 Moon Clinton Rd. Coraopolis, Pa. 15108 (412) 264-7041 Fax (412) 264-7976