

## Request for Electronic Transmission of Ballot

Pursuant to HRS§11-107, voters can request that a ballot be forwarded by electronic transmission under certain circumstances.

Check which is applicable:

- I am a voter with special needs.
- I am a voter requesting for a ballot within five days of an election.

Last Name	
First Name	
M.I.	
Suffix (Jr., II, etc.)	
Date of Birth	
Email	
Residence Address	
Phone Number	

This is a fillable pdf form. If you are unable to complete this form, please contact our office at (808) 768-3800. Please email the completed form back to: [elections@honolulu.gov](mailto:elections@honolulu.gov).

Reset

For Office Use Only  
Date Request Received:  
Date Ballot Sent:  
Staff Initial: