



# BALLOT APPLICATION

CITY OF ROCKFORD  
NAME OF ELECTION  
Date of Election

Name  
123 Vote Street

## CERTIFICATE OF REGISTERED VOTER

I hereby certify that the statements set forth in this application are true and correct; that I use the same name and am registered to vote from and reside at the address written below and that I am qualified to vote under penalties of perjury as provided by law pursuant to Section 29-10 of the Election Code.

X \_\_\_\_\_  
(name)

X \_\_\_\_\_  
(street address)

VOTER'S FACSIMILE SIGNATURE

|              |
|--------------|
| BALLOT STYLE |
| <b>109</b>   |

|  |
|--|
|  |
|--|

No. Consecutively  
Judge's Number

|  |
|--|
|  |
|--|

Judge's Initials

REGISTRATION VERIFIED BY:

|   |
|---|
| <b>WARD 14    PRECINCT 4</b>  |
| Congressional District – 16<br>Legislative District – 35<br>Representative District – 69<br>County Board – 10<br>School District – 205F<br>Judicial Circuit – 17-2<br>Township - RK |

|   |
|---|
| <b>INSTRUCTIONS TO ELECTION JUDGES</b><br>Mark below with an "X" any of the conditions listed that may apply to the voter.<br><input type="checkbox"/> Voted by affidavit <input type="checkbox"/> Spoiled ballot – Received another<br><input type="checkbox"/> Challenged <input type="checkbox"/> Assisted in voting |
|---|

|  |
|--|
|  |
|--|

BOARD OF ELECTION COMMISSIONERS  
Nancy A. Strain, Executive Director  
Judge Janet R. Holmgren, Chief Circuit Judge