| AFFIDAVIT TO PICK-UP VOTE-BY-MAIL BALLOT FOR A VOTER | |
|---|------------------------------|
| Ihereby swear or affirm that | |
| (Print the designee's name) | (Print the voter's name) |
| has authorized me to pick-up a vote-by-mail ballot on his or her behalf for the | |
| Check applicable box: | (5) |
| □ I am not a member of the voter's immediate family, or □ I am a member of the voter's immediate family and my relation to the voter is | · |
| Tull a filemost of the voter of miniculate falling and my relation to the voter of | (Relationship) |
| I understand that any person who perpetrates any fraud in connection with any vote to be cast violates s. 104.041, F.S., and can be convicted of a felony of the third degree and fined up to \$5,000 and/or imprisoned for up to five years. Under penalties of perjury, I declare that I have read the foregoing affidavit and that the facts stated in it are true. | |
| Designee's Signature Date | |
| For office use only: | |
| Designee provided the voter's written authorization as a separate document or voter completed the Voter's Written Authorization for Designee (see below) | |
| Designee produced the following picture identification: | identification) |
| An authorized designee may pick up a ballot any time within 9 days of election day including election day. A designee is limited to picking up a ballot for himself or herself, for members of his or her immediate family, and for up to 2 other voters per election. A vote-by-mail ballot request for the voter must already be on record by law (section 101.62(1)(b), F.S.) Otherwise, the written authorization must include the information required for a vote-by-mail ballot request, or other confirmation obtained from the voter. | |
| Voter's Written Authorization for Designee (To be completed only if separate voter's written authorization not submitted) | |
| 1 | hereby designate |
| (Voter's name-printed) (Voter's signature) to pick up my vote-by-mail ballot for the | |
| (Print designee's name) | (Specify for which election) |
| Attention: Provide the following additional information if you (the voter) do not already have a vote-by-mail ballot request on record: | |
| Voter's date of birth (MM/DD/YY) Voter's addres | ss |

DS-DE 37 (rev. 07-2019) s.101.62(4)(c)4., Fla. Stat.