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| armpostcard | **Application for Designation of Agent by an Individual with a Disability**  A voter who is unable due to disability to provide a signature may apply to the election administrator to have another person designated as an agent for purposes of providing a signature or identifying mark required and for delivering the voter’s absentee ballot application to the county election administrator, and for providing any other assistance to the voter throughout the registration and voting process. The use of an agent is a reasonable accommodation under the provisions of 49-2-101(19)(b), MCA. |
| **FORM MUST BE COMPLETED AND RETURNED TO THE COUNTY ELECTION OFFICE** | |
| Whenever my signature is required, I an individual with a disability, hereby  [*print name of voter*]  designate to act as my agent for the purpose of signing election documents  [*print name of designated agent*]  and for providing any other assistance to me throughout the registration and voting process.  By providing an identifying mark (if possible) below, I am authorizing the person named above to act as my designated agent for providing a signature or identifying mark required pursuant to this title and for providing any other assistance to me throughout the registration and voting process. I understand that this Designation of Agent is valid until I notify the election administrator that it is rescinded.  *voter’s identifying mark (if possible)* | |
| **SIGNATURES OF WITNESSES** | |
| *NOTE: This designation is not valid unless witnessed by two disinterested persons.*  *signature of 1st witness printed name of 1st witness date*  *signature of 2nd witness printed name of 2nd witness date* | |
| **ADDITIONAL INFORMATION** | |
| * A voter may rescind this agency at any time by notifying the election administrator. * An agent must not be the voter’s employer, an agent of the individual’s employer, or an officer or agent of the voter’s union. * An election official must ask if the person being designated an agent is the voter’s employer or employer’s agent or officer or agent of the voter’s union. If the proposed agent is one of those individuals, the voter must choose another person to be the voter’s agent. * An agent can be chosen only by the individual with a disability. * If an agent, election administrator, or election judge signs or marks a document for a voter, the agent, election administrator, or election judge shall initial the signature or mark. | |
| **SIGNATURE OF DESIGNATED AGENT** | |
| I, the agent for the above-named voter, shall retain a copy of this application and shall file this original application with the election administrator upon completion.  I understand that I must perform my duty as an agent for the benefit of the voter and that the voter has a right to be free of interference and coercion throughout the election process.  I understand that if I act in a manner that in any way interferes with the voter’s ability to complete or cast the ballot, or coerce the voter in any manner, I will be in violation of the provisions of Title 13, Chapter 35, Part 2 of the Montana Code Annotated and subject to fine or penalty.  for  *signature of designated agent printed name of individual with a disability date* | |

*Updated March 21, 2017*