

TOWN OF AKRON

250 Main Ave
Akron, Colorado 80720
970-345-2624
admin@townofakron.com

Clerk's Office Use Only

Date Received _____

Date Processed _____

Clerk's Initials _____

Ballot Number _____

Regular Municipal Election Tuesday, April 7, 2026 Application for Absent Voter Ballot Request

APPLICATIONS FOR ABSENTEE BALLOTS SHALL BE FILED IN WRITING WITH THE CLERK NOT EARLIER THAN 90 DAYS AND NOT LATER THAN THE CLOSE OF BUSINESS ON THE FRIDAY IMMEDIATELY PRECEDING A REGULAR OR SPECIAL ELECTION. IF YOU COMPLETE AND SUBMIT THIS APPLICATION, YOU MAY NOT CHANGE YOUR MIND.

Return Completed Application To: Town of Akron, c/o: Town Clerk, 250 Main Ave, Akron, CO 80720

Date of Application (Required)

PRINT NAME AS REGISTERED (Required)

Date of Birth (Required)

Residential Street Address (Required), City, State, Zip

Daytime Phone (Optional)

Current Mailing Address (Required), City, State, Zip

Evening Phone (Optional)

Please mail an absentee ballot and all necessary supplies for the above referenced Town of Akron Municipal Election to the following address:

Mailing Address: _____
Number, Street, and Apartment or Unit (*If different from the physical address above*)
Town/City & State: _____ Zip: _____

By signing/marking below, I certify that I am a qualified and registered elector in the Town of Akron, County of Washington and State of Colorado. I have lived in Colorado at least 22 days prior to this election. I also certify that this application is for my ballot to be completed by me.

VOTER SIGN HERE _____ By _____
*Witness Signature

*The applicant or a family member related by blood or marriage shall personally sign the application for an absentee ballot; or in case of the applicant's inability to sign, another person shall witness the elector's mark.

The Colorado Absent Voter Law requires that, in order for your ballot to be counted, it must reach the Town of Akron Clerk's office by 7:00 p.m. on Tuesday, the day of the election.