REQUEST FOR EARLY VOTE
SPECIAL ELECTION FOR PUERTO RICO CONGRESSIONAL DELEGATES
(Register Early Vote Closing – Saturday, March 27, 2021)

Electoral ID Number

Last Name

Surname

First Name

Middle Initial

Date of Birth

Gender

Twin

Day

Month

Year

F

M

Yes

No

Birth Place

Person with disabilities

Blind

Other:_____________________

Father / Mother’s name

Mother / Father’s name

Home Address

Street, lot, building number, apartment, or unit

Place, or community

Postal Address

Street, lot, building number, apartment, or unit;
PO Box, HC o RR

Place, or community

Mobile Phone

Home Phone

E-mail

FOR JAVAA OR JIP USE ONLY

Control Number:

Status:

Precinct:

Unit:

Approval Pending:

Final:

Control Number:

Status:

Precinct:

Unit:

Approval Pending:

Final:
I affirm that I am unable to vote at the polling station where I am registered, because I will be assigned on indispensable duties or in compliance of the exceptions given by the law.

Instructions:
Choose the category to which you belong and then the way you will vote: Mail, Precinct Vote or CEE. You may only choose one (1) category and one (1) voting method.

☐ A Commission Member, CEE employee, or Commissioner legal advisor. Office: _______________________
Preferred Polling place: ☐ CEE ☐ Precint

☐ B Person working in the Special Election for one of the certified Candidates.
Preferred Polling place: ☐ CEE ☐ Precint

☐ C Enrollment officer for the precinct:
Preferred Polling place: ☐ CEE ☐ Precint

☐ D President of Local Commission: ☐ Principal ☐ Alternate
Preferred Polling Place: ☐ Precinct ☐ Mail

☐ E Local Commissioner for the precinct: ☐ Principal ☐ Alternate
Preferred Polling place: ☐ CEE ☐ Precint

☐ F Work Voter – Any voter who is a public employee, private employee or self-employed who states that his or her to be in his or her employment center within Puerto Rico is located outside his/her domicile area.
Preferred Polling place: ☐ CEE ☐ Precint

☐ G Candidate Voter – Any voter who is a Candidate or Elective Candidate at the election event.
Preferred Polling place: ☐ CEE ☐ Precint

☐ H Travel Voter – Any voter who, after the term to submit Absent or Early Vote application, becomes aware that he or she will be physically outside Puerto Rico for any reason on election day, and became aware before election day. Dateline to submit application is May 3rd, 2021.
Preferred Polling place: ☐ CEE ☐ Precint

☐ I Hospitalized Voter – Any voter who will be admitted in the election day as a patient in a hospital institution, long-term treatment or health care institution.
Preferred Polling place: ☐ CEE ☐ Precint

☐ J Voter Over sixty (60) years old
Preferred Polling place: ☐ CEE ☐ Precint

☐ K Confined Voter – All voters imprisoned in a penal institutions or youth institutions in Puerto Rico.
Preferred Polling place: ☐ CEE ☐ Precint
<table>
<thead>
<tr>
<th></th>
<th>Description</th>
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<tbody>
<tr>
<td>L1</td>
<td>Accessible voting at home or Voting Center</td>
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<td>Physical Impair Voter – Any voter with physical or visual impairment who,</td>
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<td>during the fifty (50) days prior to and until the election day, has been</td>
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<td>and will continue to use a wheeled chair, crutches, equipment necessary</td>
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<td>for mobility; or has obvious limitations to move around with or without on</td>
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<td></td>
<td>equipment.</td>
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<td>Preferred Polling place: CEE Precint</td>
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<tr>
<td>L2</td>
<td>Easy Home Access Voting Voter – Any voter with a disability or an obvious</td>
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<td>moving limitations or bedridden or any type of medical condition that</td>
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<td>prevents them from attending the voting center, or any voter who is</td>
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<td>eighty (80) years of age and older.</td>
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<td>Preferred Polling place: CEE Precint</td>
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<td>L3</td>
<td>Voter at a home or residential care – All voters with special conditions</td>
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<td>who resides in these places but is not his/her register domicile for</td>
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<td>electoral register.</td>
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<td>Preferred Polling place: CEE Precint</td>
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<tr>
<td>L4</td>
<td>Only caregiver – A voter who is the only person available in the family</td>
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<td>unit for the care of children under the age of fourteen (14) years,</td>
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<td>persons with disabilities or people who are bedridden at home.</td>
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</table>

Name: _____________________________ Relationship: __________________________ 
Electoral ID Number: _____________

“I swear (or declare) that I file this Early Voting Application because I am a registered and active voter in the General Register of Voters of Puerto Rico; and I comply with all requirements for the voter’s categories eligible for early vote of the next electoral event. I affirm that all the information I include in my Early Voting Application is true and correct. I am aware that falsifying information stated by me voluntarily in this application could represent the loss of my voting opportunity, the non-adjudication of my vote, or the imposition of penalties under the 2020 Puerto Rico Election Code.”

Applicant’s Signature or Mark Witness Signature (in case the applicant not sign) 
Date: ____________________________

Local Commission Verification:

- It is authorized to record the request transaction accessible voting at home.
- It is authorized to record the request transaction accessible voting at home after that:
  - Enroll the applicant
  - Reactivate, transfer or relocate to an electoral unit
  - Correct deficiencies on the application

Note: This request will be sent to JAVAA by FAX to (787) -777- 8358, (787) 294 -3120 o (787) 777 - 4075 once recorded.

Local Commission Certification

Local Commission President Signature

First Party Commissioner Signature

Second Party Commissioner Signature

Third Party Commissioner Signature

Fourth Party Commissioner Signature

Fifth Party Commissioner Signature

THIS APPLICATION MUST BE DELIVERED TO JAVAA OR JIP BY: 
Saturday, March 27, 2021