Statement of Absentee Elector Requiring Assistance

I _____
(Name of voter requiring assistance)

hereby state that I shall require assistance in marking the official absentee ballot for the primary or election

held _____ 20_____ that will be

issued to me for the following reason.

_____
(Insert nature of disability)

_____
(Signature or mark of elector)

_____
(Date of signature or mark)

Commonwealth of Pennsylvania } SS
County of _____

On this _____ day of _____ 20_____

before me _____the undersigned

officer, personally appeared _____
known to me (or satisfactorily proven) to be the person, whose signature or mark appears on the within instrument and acknowledged the same for the purpose therein contained.

In witness whereof I have hereunto set my hand and official seal

_____

_____
(Title of Officer)