

Example 1

State of Iowa Ballot Record and Receipt & Seal Verification Log

County: _____ Election Name and Date: _____

Precinct: _____ Polling Place Name: _____

Polling Place Address: _____
Street Address City Zip

**Numbers in fields with an asterisk (*) must match.*

Delivered to the Precinct

Ballot Style	# of Ballots Delivered
Total # of All Ballots Delivered	*

Optical Scan Seal #s	AutoMARK Seal #s

Ballot Delivery:

Ballot containers sealed? Yes No

Date: ____/____/____ Time: ____:____ a.m/p.m.

Delivered by: **X** _____
Signature

Received by: **X** _____
Signature

Returned from the Precinct

Ballot Style	# Voted & Counted	# Disputed	# Spoiled	# Provisional	# Not Voted	Total # Returned
Totals:						*
# of Absentee Ballots Surrendered (and not counted)						
Total # of All Ballots Returned						

Optical Scan Seal #s	AutoMARK Seal #s

Ballot Return:

Ballot containers sealed? Yes No

Date: ____/____/____ Time: ____:____ a.m/p.m.

Delivered by: **X** _____
Signature

Received by: **X** _____
Signature

Example 1

State of Iowa Ballot Record and Receipt & Seal Verification Log

Voted and Counted

Ballots that were counted by the precinct officials without any objections or unresolved disputed are returned in an envelope or container that must be sealed in the precinct. The seal must bear the signatures of all precinct officials. The seal should be placed on the envelope or container so that the package cannot be opened without breaking the seal.

Disputed Ballots

These are ballots that were deposited in the ballot box, but the precinct officials found them to be defective in some way. There are two types of disputed ballots: ballots that were not counted because they were folded together so that they appeared to be cast as a single ballot and ballots that were counted without unanimous agreement of the precinct board.

Spoiled Ballots

Voters who make errors in marking their ballots may return the spoiled ballots to the precinct officials for a new one. A voter may not receive more than three ballots, including the first one delivered. The spoiled ballots are not counted, but must be returned to the commissioner.

Provisional Ballots

Voters whose qualifications to vote have been challenged or voters who cannot prove they are qualified to vote have the right to vote a provisional ballot. The provisional ballot is sealed in an envelope and kept separate from other ballots.

Not Voted

All unused ballots must be accounted for and returned.

Total Number Returned

Add together the number of ballots voted, disputed, spoiled, provisional and not voted for each type of ballot. This number should equal the number of ballots of each type that were delivered to the precinct.

Absentee Ballots Surrendered (and not counted)

Some voters may bring absentee ballots to the polling place, turn them in and vote at the polling place. Keep these ballots separate. Do NOT examine or count them.

Example 2

State of Iowa
Affidavit of Voter Requesting Assistance

I declare that I am unable to vote without help due to blindness, inability to read English, or any other physical disability. I request the help of the two precinct officials designated to help voters in this precinct OR another person of my choice.

Please note: Under Federal law, a voter may not be assisted by the voter's employer, an agent of the voter's employer, or an officer or agent of the voter's union. [42 USC 1973aa-6]

Print Voter's Name: _____

Election Name: _____

Election Date: _____

Precinct: _____

VOTER REQUESTING ASSISTANCE

X _____ **X** _____
Voter's Signature Signature of any other person assisting voter

Reminder to precinct election official: Please note on the election register that this person voted with assistance.

State of Iowa
Affidavit of Voter Requesting Assistance

I declare that I am unable to vote without help due to blindness, inability to read English, or any other physical disability. I request the help of the two precinct officials designated to help voters in this precinct OR another person of my choice.

Please note: Under Federal law, a voter may not be assisted by the voter's employer, an agent of the voter's employer, or an officer or agent of the voter's union. [42 USC 1973aa-6]

Print Voter's Name: _____

Election Name: _____

Election Date: _____

Precinct: _____

VOTER REQUESTING ASSISTANCE

X _____ **X** _____
Voter's Signature Signature of any other person assisting voter

Reminder to precinct election official: Please note on the election register that this person voted with assistance.

Prepared by the Iowa Secretary of State's Office

Revised 6/09

Example 3

STATE OF IOWA OFFICIAL VOTER REGISTRATION FORM		Revised 4/9/2014
In Iowa, you are not qualified to vote if you have been convicted of a felony and have not received a restoration of voting rights. You may apply to the Governor to restore your voting rights.		
Qualifications	1. Are you a citizen of the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No 2. Will you be 18 years of age on or before Election Day? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If you answered "No" to either of these questions, do not complete this form.		
ID Number <small>Provide your Iowa driver's license, non-operator ID number, or the last 4 digits of your Social Security number if you have one.</small>	<input type="checkbox"/> IA driver's license #: _____ <input type="checkbox"/> IA non-operator ID #: _____ <input type="checkbox"/> Last 4 digits of Social Security number: XXX - XX - _____ <input type="checkbox"/> I do not have an IA driver's license, non-operator ID, or Social Security number.	
Additional Information <small>Date of birth and gender are required.</small>	Date of Birth (month, day, year) _____ / _____ / _____ Gender <input type="checkbox"/> Male <input type="checkbox"/> Female Phone and/or Email (optional) _____	
Your Name	Last _____ First _____ Middle _____ Suffix _____	
Address Where You Live	Street Address <small>(include apt., lot, etc.)</small> _____ City _____ Zip _____ County _____ If homeless or you do not have an established residence, describe where you reside: _____	
Where You Receive Mail <small>(if different)</small>	Address/P.O. Box _____ City _____ State _____ Zip _____	
Previous Voter Registration Information	Your name was _____ Your address was _____ Your city and state were _____ Your zip was _____	
Political Affiliation <small>(check only one)</small>	Political Parties: <input type="checkbox"/> No Party <input type="checkbox"/> Democratic <input type="checkbox"/> Republican Non-Party Political Organizations: <input type="checkbox"/> Green <input type="checkbox"/> Libertarian	
WARNING If you sign this form and you know the information is not true, you may be convicted of perjury and fined up to \$7,500 and/or jailed for up to 5 years.	<div style="text-align: center;">Registrant Affidavit</div> I swear or affirm under penalty of perjury that: <ul style="list-style-type: none"> ▪ I am the person named above. ▪ I am a citizen of the United States. ▪ I have not been convicted of a felony (or I have received a restoration of rights). ▪ I am at least 17 ½ years old. ▪ I live at the address listed above. ▪ I am not currently judged by a court to be "incompetent to vote." ▪ I do not claim the right to vote anywhere else. <div style="display: flex; justify-content: space-between; margin-top: 10px;"> Signature _____ Date _____ </div>	

Example 4

Provisional Ballot Envelope

Reason for Provisional Ballot

To be completed by Precinct Official

Precinct: _____

Election Date: ____/____/____

Reason for Provisional Ballot (check all that apply):

Voter did not have proper identification

Absentee voter with no ballot to surrender

Voter was challenged by another registered voter (attach the signed challenge to this envelope)

PROVISIONAL LABEL 1

Precinct Election Official's Signature Date

Affidavit of Provisional Voter

To be completed by Voter

Print Name: _____

Address: _____

Date of birth: ____/____/____

Phone (optional): _____

PROVISIONAL LABEL 2

I do solemnly swear or affirm all of these things. I am a United States citizen, at least 18 years of age. I believe that I am a registered voter of this county and/or eligible to vote in this election. I have not voted and will not vote in any other precinct in this election. If my current voter registration record indicates another party affiliation or no party affiliation, I swear or affirm that I have in good faith changed my previously declared party affiliation, or declared my party affiliation, and now desire to be a member of the party indicated herein. I understand that any false statement in this declaration is a criminal offense punishable as provided by law.

Voter's Signature Date

To be completed by Voter

Complete voter registration form. Mark ballot & seal in envelope. Return completed ballot in envelope to Precinct Official.

In Iowa, you are not qualified to vote if you have been convicted of a felony and have not received a restoration of voting rights. You may apply to the Governor to restore your voting rights.	
Qualifications	1. Are you a citizen of the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No 2. Will you be 18 years of age on or before Election Day? <input type="checkbox"/> Yes <input type="checkbox"/> No
If you answered "No" to either of these questions, do not complete this form.	
ID Number Provide your Iowa driver's license, non-operator ID number, or the last 4 digits of your Social Security number if you have one.	<input type="checkbox"/> IA driver's license #: _____ <input type="checkbox"/> IA non-operator ID #: _____ <input type="checkbox"/> Last 4 digits of Social Security number: XXX-XX-_____ <input type="checkbox"/> I do not have an IA driver's license, non-operator ID, or Social Security number.
Additional Information Date of birth and gender are required.	Date of Birth (month, day, year) ____/____/____ Gender <input type="checkbox"/> Male <input type="checkbox"/> Female Phone and/or Email (optional) _____
Your Name	Last _____ First _____ Middle _____ Suffix _____
Address Where You Live	Street Address (include apt., lot, etc.) _____ City _____ Zip _____ County _____ If homeless or you do not have an established residence, describe where you reside: _____
Where You Receive Mail (if different)	Address/P.O. Box _____ City _____ State _____ Zip _____
Previous Voter Registration Information	Your name was _____ Your address was _____ Your city and state were _____ Your zip was _____
Political Affiliation (check only one)	Political Parties: <input type="checkbox"/> No Party <input type="checkbox"/> Democratic <input type="checkbox"/> Republican Non-Party Political Organizations: <input type="checkbox"/> Green <input type="checkbox"/> Libertarian
WARNING If you sign this form and you know the information is not true, you may be convicted of perjury and fined up to \$7,500 and/or jailed for up to 5 years.	Registrant Affidavit I swear or affirm under penalty of perjury that: <ul style="list-style-type: none"> ▪ I am the person named above. ▪ I am a citizen of the United States. ▪ I have not been convicted of a felony (or I have received a restoration of rights). ▪ I am at least 17 ½ years old. ▪ I live at the address listed above. ▪ I am not currently judged by a court to be "incompetent to vote." ▪ I do not claim the right to vote anywhere else. Signature _____ Date _____

Prepared by the Iowa Secretary of State's Office Revised 4/9/14

Statement to Person Casting a Provisional Ballot

(To be completed by Precinct Official and given to Voter)

Voter's Name: _____

Reason for Provisional Ballot (check all that apply):

Voter did not have proper identification (see "What you need to provide" below)

Absentee voter with no ballot to surrender

Voter was challenged by another registered voter
Reason: _____

PROVISIONAL LABEL 3

What you need to provide before your ballot will count:

Photo ID that has not expired and contains your name and picture

One of the following that has not expired: Iowa driver's license, out-of-state driver's license, non-driver ID, U.S. passport, U.S. military ID, employer ID card, student ID issued by Iowa high school or college

One of the following showing your name and current address: bank statement, paycheck, utility bill, property tax statement, residential lease, government check, or other government document.

Deadline: _____ a.m./p.m., _____ (date)

PROVISIONAL LABEL 4

Mail or Deliver Evidence to: _____, County Auditor

County Auditor Address: _____

If proof of ID or residence is required, your provisional ballot may be counted if you bring a copy of the identification listed above to this precinct before the polls close today or to the county auditor at the above address by the above deadline. If your ballot is not counted, you will be notified by mail of the reason why it was not counted.

PROVISIONAL LABEL 5

Your right to vote will be reviewed by the Special Precinct Board. You have the right and are encouraged to make a written statement and submit additional written evidence to the Board supporting your qualifications as a registered voter.

Precinct Election Official's Signature Date

Example 5

State of Iowa Election Day Voter Registration Form

In Iowa, you are not qualified to vote if you have been convicted of a felony and have not received a restoration of voting rights. You may apply to the Governor to restore your voting rights.			
Qualifications	1. Are you a citizen of the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No 2. Will you be 18 years of age on or before Election Day? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If you answered "No" to either of these questions, do not complete this form.			
ID Number <small>Provide your Iowa driver's license, non-operator ID number, or the last 4 digits of your Social Security number if you have one.</small>	<input type="checkbox"/> IA driver's license #: _____ <input type="checkbox"/> IA non-operator ID #: _____ <input type="checkbox"/> Last 4 digits of Social Security number: XXX - XX - _____ <input type="checkbox"/> I do not have an IA driver's license, non-operator ID, or Social Security number.		
Additional Information <small>Date of birth and gender are required.</small>	Date of Birth (month, day, year) _____/_____/_____ Gender <input type="checkbox"/> Male <input type="checkbox"/> Female Phone and/or Email (optional) _____		
Your Name	Last _____ First _____ Middle _____ Suffix _____		
Address Where You Live	Street Address _____ <small>(include apt., lot, etc.)</small> City _____ Zip _____ County _____ If homeless or you do not have an established residence, describe where you reside: _____		
Where You Receive Mail <small>(if different)</small>	Address/P.O. Box _____ City _____ State _____ Zip _____		
Previous Voter Registration Information	Your name was _____ Your address was _____ Your city and state were _____ Your zip was _____		
Political Affiliation <small>(check only one)</small>	Political Parties: <input type="checkbox"/> No Party <input type="checkbox"/> Democratic <input type="checkbox"/> Republican Non-Party Political Organizations: <input type="checkbox"/> Green <input type="checkbox"/> Libertarian		
WARNING <small>If you sign this form and you know the information is not true, you may be convicted of perjury and fined up to \$7,500 and/or jailed for up to 5 years.</small>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 5px;"> Registrant Affidavit I swear or affirm under penalty of perjury that: <ul style="list-style-type: none"> ▪ I am the person named above. ▪ I am a citizen of the United States. ▪ I have not been convicted of a felony (or I have received a restoration of rights). ▪ I am at least 17 ½ years old. ▪ I live at the address listed above. ▪ I am not currently judged by a court to be "incompetent to vote." ▪ I do not claim the right to vote anywhere else. </td> <td style="width: 50%; padding: 5px;"> Signature _____ Date _____ </td> </tr> </table>	Registrant Affidavit I swear or affirm under penalty of perjury that: <ul style="list-style-type: none"> ▪ I am the person named above. ▪ I am a citizen of the United States. ▪ I have not been convicted of a felony (or I have received a restoration of rights). ▪ I am at least 17 ½ years old. ▪ I live at the address listed above. ▪ I am not currently judged by a court to be "incompetent to vote." ▪ I do not claim the right to vote anywhere else. 	Signature _____ Date _____
Registrant Affidavit I swear or affirm under penalty of perjury that: <ul style="list-style-type: none"> ▪ I am the person named above. ▪ I am a citizen of the United States. ▪ I have not been convicted of a felony (or I have received a restoration of rights). ▪ I am at least 17 ½ years old. ▪ I live at the address listed above. ▪ I am not currently judged by a court to be "incompetent to vote." ▪ I do not claim the right to vote anywhere else. 	Signature _____ Date _____		

1

Voter's Oath

I, the undersigned Registrant, do solemnly swear or affirm the following: I am the person named below, I live at the address below, I do not claim the right to vote anywhere else; I have not voted and will not vote in any other precinct in this election.

Registrant name: _____

Registrant address: _____

Registrant precinct: _____

I understand that any false statement in this oath is a class "D" felony punishable by no more than five (5) years in confinement and a fine of at least \$750 but not more than \$7,500.

Registrant signature

Precinct Election Official signature

Date

2

Attester's Oath

I, the undersigned Attester, do solemnly swear or affirm the following: I am a pre-registered voter in this precinct or I registered to vote in this precinct today, and a registered voter did not sign an oath on my behalf; I have not signed an oath attesting to the identity and residence of any other person in this election; I personally know the above Registrant and that the Registrant is a resident of this precinct.

Attester name: _____

Attester address: _____

Attester precinct: _____

I understand that any false statement in this oath is a class "D" felony punishable by no more than five (5) years in confinement and a fine of at least \$750 but not more than \$7,500.

Attester signature

Precinct Election Official signature

Date

Prepared by the Iowa Secretary of State's Office Revised 4/9/14

Example 6

State of Iowa Challenger's Statement

Notice to Challenger: A person may not be challenged for reporting a change of address at the polls or registering to vote at the polls on Election Day as permitted by Iowa law. (Iowa Code 49.79)

Voter and Election Information:

Voter name: _____

Election date: _____

County: _____

Deadline: _____ a.m./p.m. _____ (date)

CHALLENGER'S STATEMENT - LABEL 1

Required Challenger Information:

Challenger name: _____

Challenger address: _____

Challenger phone #: _____

CHALLENGER'S STATEMENT - LABEL 2

Reason for Challenge: (check all that apply)

- Is not a United States citizen. Is deceased.
- Is not a resident at the address where the person is registered.
- Has falsified information on a registration form or on a declaration of eligibility.
- Was adjudged incompetent to vote.

CHALLENGER'S STATEMENT - LABEL 3

Reason for Challenge, continued:

- Is less than 18 years of age on Election Day.
- Is not a resident of the precinct where the person is offering to vote.
- Was convicted of a felony and voting rights have not been restored.
- Voter status is not active (absentee voter only).

CHALLENGER'S STATEMENT - LABEL 4

Provide details for the reason or reasons checked above:

Challenger's Affirmation and Statement:

I challenge the qualifications of this voter to vote at this election, because of the reason or reasons listed herein.

I am a registered voter in _____ County, Iowa. I swear or affirm that information contained in this challenge is true.

I understand that knowingly filing a challenge containing false information is an aggravated misdemeanor. I also understand this challenge will be rejected if it does not include all of the Required Challenger Information.

I understand if I wish to withdraw this challenge, I may notify the precinct election officials at this polling place before the polls close on Election Day, or I may notify the County Auditor in writing before the special precinct board meets at the time of the deadline stated herein.

X _____

Challenger's Signature

County Auditor's Office use only:

Keep the original of this form in your office.

Provide notice: If this challenge was made in the Special Voters' Precinct, provide notice of the challenge to the voter. Notice of this challenge was provided to the voter by:

- In Person
- Mail
- Telephone
- Fax

Date and time of notice to voter:

____/____/____ ____:____ am/pm

Response received from voter:

____/____/____ ____:____ am/pm

Example 7

State of Iowa Poll Watcher Designation Form

Name of Person Filling Out This Form: _____

Home Address: _____
House Number and Street Address City Zip Code

Phone Number: _____ E-mail: _____

Select one of the following options and sign and date at the bottom of form.

Appoint poll watcher for a political party

(This form must be filled out by the county chairperson or a central committee officer.)

Election: General ___/___/___ Primary ___/___/___ Special ___/___/___
 City ___/___/___ School ___/___/___

Name of Political Party: _____

Certification: The people named on the attached list are designated to serve as poll watchers for the political party named above for this election. Not more than three have been assigned to any one precinct at a time.

Date these appointments were approved by the executive or central committee: ___/___/___

Appoint a poll watcher for a non-party candidate or non-party political organization

(This form must be filled out by a candidate whose name appears on the ballot at the election named below.)

Election: General ___/___/___ Primary ___/___/___ Special ___/___/___
 City ___/___/___ School ___/___/___

Name of person I designate as a poll watcher: _____

List precinct(s) and hours poll watcher will serve: _____

My name will appear on the ballot as a candidate for the office of: _____

Intent to serve as a poll watcher for a public measure appearing on the ballot at the election named below

(This form must be filled out by the person wishing to serve as a poll watcher.)

Election: School ___/___/___ City ___/___/___ Special ___/___/___

Public Measure in which I am interested: _____

My position on the public measure: Support Oppose

Precinct(s) and hours I would like to serve: _____

Certification: I would like to serve as an observer at the election listed above. I understand that no more than three people who are interested in ballot questions are permitted to be present in a precinct at one time. If more than three people file notices with the county auditor, the auditor has the authority to appoint three people to serve as observers. The appointees, whenever possible, shall include both supporters and opponents.

Signature: _____ **Date:** _____

Prescribed by the Iowa Secretary of State's Office

Revised 6/09

Example 8

State of Iowa Voter's Declaration of Eligibility	
I do solemnly swear or affirm that I reside in _____ County, Iowa at the address below. I am a registered voter. I have not and will not vote in any other precinct in this election.	
Primary Elections Only I am affiliated with the _____ party. If my current voter registration record indicates another party affiliation or no party affiliation, I swear or affirm that I have in good faith changed my previ- ously declared party affiliation, or declared my party affiliation, and now de- sire to be a member of the party indicated above.	
<i>I understand that any false statement in this declaration is a criminal offense punishable as provided by law.</i>	
_____ Print Voter's Name	_____ Date
_____ Voter's Address	_____ Phone - optional
_____ City, Zip	_____ Precinct
X _____ Voter's Signature	_____ Precinct Official

State of Iowa Voter's Declaration of Eligibility	
I do solemnly swear or affirm that I reside in _____ County, Iowa at the address below. I am a registered voter. I have not and will not vote in any other precinct in this election.	
Primary Elections Only I am affiliated with the _____ party. If my current voter registration record indicates another party affiliation or no party affiliation, I swear or affirm that I have in good faith changed my previ- ously declared party affiliation, or declared my party affiliation, and now de- sire to be a member of the party indicated above.	
<i>I understand that any false statement in this declaration is a criminal offense punishable as provided by law.</i>	
_____ Print Voter's Name	_____ Date
_____ Voter's Address	_____ Phone - optional
_____ City, Zip	_____ Precinct
X _____ Voter's Signature	_____ Precinct Official

Example 9

Notice to Election Day Registrants

Convicted Felons

If you have ever been convicted of a felony, your voting rights must be restored by the Iowa Governor before you can register and vote today. If you are not 100% sure your right to vote has already been restored, request a provisional ballot.

Convicted felons who register and vote without receiving a restoration of rights are committing a class “D” felony, punishable by a prison term of up to 5 years and a fine of up to \$7,500.

Other Election Day Registration Requirements

To register and vote today, you must also:

- Be at least 18 years of age
- Be a citizen of the United States
- Reside in the precinct where you are registering to vote
- Not claim the right to vote anywhere else