Town of Grand Lake 1026 Park Avenue P.O. Box 99 Grand Lake, CO 80447 970-627-3435

AS YOU RECEIVE IT.

FOR OFFICIAL USE ONLY	
Date Received:	
Ballot #:	
Clerk Initial:	
Date Mailed:	



TOWN OF GRAND LAKE APPLICATION FOR PROVISIONAL VOTER BALLOT MUNICIPAL ELECTION APRIL 2, 2024

APPLICATIONS WILL BE ACCEPTED UNTIL FRIDAY, March 29, 2024.

To: Alayna Carrell, Town Clerk of the Town of Grand Lake, Colorado:

Full Name as Registered	Date of Birth	Social Security Number (last 4)
Residential Street Address (NO PO Boxes)	City, St	ate, Zip Code
Please mail my ballot to the following addre	ss (if different from a	above address):
Mailing Address	City, St	ate, Zip Code
hereby certify that I am a qualified and regi	stered elector in the	Town of Grand Lake, County of Grand, and State og
hereby certify that I am a qualified and regi Colorado and have lived at the residence list	stered elector in the	Town of Grand Lake, County of Grand, and State og rs prior to this election.
Mailing Address I hereby certify that I am a qualified and regi Colorado and have lived at the residence list Voter Signature OR	istered elector in the ed at least thirty day	Town of Grand Lake, County of Grand, and State og rs prior to this election.
I hereby certify that I am a qualified and regi Colorado and have lived at the residence list Voter Signature	istered elector in the ed at least thirty day 	Town of Grand Lake, County of Grand, and State og rs prior to this election.

BALLOT MAY BE MAILED OR HAND DELIVERED BY ANY PERSON. MARK AND RETURN YOUR BALLOT AS SOON