

Displaced Voter Affidavit

Ward/ Precinct: _____

I _____ hereby certify that I am a registered voter of the Parish of
(Name of Registered Voter)

_____, that I am temporarily displaced from my parish of residence by reason
(Parish of Registration)

of the state of emergency declared in response to hurricanes Katrina and/or Rita, that I am eligible to vote in
my parish of residence, and that I expect to be out of my parish of registration during early voting and on
Election Day.

I declare the foregoing to be true under penalty of perjury for providing false or fraudulent information.

(Printed name of registered voter)

(Signature or mark of registered voter)

(Date of Signature)

This Affidavit should be signed by below by two witnesses **or** a notary:

(Witness #1 Signature)

(Witness #2 Signature)

AFFIDAVIT MUST BE SUBMITTED WITH THE APPLICATION TO VOTE ABSENTEE BY MAIL.