



Application for Absentee Ballot
June 11, 2019
Budget Validation Referendum
School Administrative District No. 11

OFFICE USE ONLY _____ Date/Time _____

Application Received _____

Ballot Sent _____

Ballot Returned _____

An absentee ballots must be received by the Municipal Clerk by the close of business on **Thursday, June 6, 2019**, unless special circumstances exist.

Voted absentee ballots must be received by the Municipal Clerk by **8 p.m. on June 11, 2019**.

1. Full Name of Registered Voter Requesting the Ballot _____

2. Residence Address of Voter _____
(Street Address) (Municipality)

3. Voter's Date of Birth ____/____/____
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4. Daytime Phone Number (optional) _____

5. Method of Delivery of Ballot to the Voter

a) ☐ Issued to Voter (Application Required if Voter Will Vote Outside the Municipal Clerk's Presence)

b) ☐ By Mail to this Address _____

c) ☐ By immediate Family Member of Voter _____

Designated Here _____
(Name) (Relationship to Voter)

d) ☐ By this 3rd Person (Designated by the Voter) _____
(Name) (Telephone #)

6. Signature of Voter OR Immediate Family Member of Voter

_____ Date _____

Note: If immediate family member of the voter is completing this application, the relationship to the voter must be provided in 5(c) above. The absentee ballot can be delivered to the immediate family member in person or mailed to the address provided in 5(b).

7. Signature of Immediate Family Member Returning the Ballot _____

Relationship to Voter _____

(Complete Section #7 Only if Ballot was Delivered to the Voter or a Different Immediate Family Member of the Voter)

AIDE CERTIFICATE (Must be Completed if Applicant was Assisted as Designated Below)

If the voter received assistance completing this application, the person who assisted the voter must complete and sign this certificate.

I helped this voter: ☐ read the application ☐ sign the application ☐ read and sign the application

Signature of Aide _____ Printed Name of Aide _____