



# Application for Absentee Ballot June 11, 2024 Primary Election

Absentee ballots will become available and will be provided to voters beginning in early May.

**Application Received**  
(Date/Time)

**Ballot Sent/Delivered**  
(Date/Time)

**Enrollment**

An absentee ballot request must be received by the Municipal Clerk by the close of business on **Thursday, June 6, 2024**, unless special circumstances exist.

**Voted absentee ballots must be received by the Municipal Clerk by 8 p.m. on June 11, 2024.**

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. Contact Information – Please complete. Clerk will use only to notify the voter if there is a problem with the application or ballot.

Daytime Phone Number \_\_\_\_\_ Email Address \_\_\_\_\_

5. **Ballot requested:** A voter not enrolled in a political party may participate in a party's primary without enrolling in the party. An unenrolled voter may vote in only one primary election. Indicate the party for which you want to receive a ballot. NOTE: A voter enrolled in a party will receive the ballot for that party regardless of the party indicated below.

**Democratic**    **Green Independent** (Congressional District 1 only)    **Republican**

6. 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 Below:

\_\_\_\_\_  
(Name) (Relationship to Voter)

d.  By this 3rd Person (Designated by the Voter) \_\_\_\_\_  
(Name) (Telephone #)

7. Signature of Voter OR Immediate Family Member of Voter \_\_\_\_\_ Date \_\_\_\_\_

**Note:** If an immediate family member of the voter is completing this application, the relationship to the voter must be provided in 6(c) above. The absentee ballot can be delivered to the immediate family member in person or mailed to the address provided in 6(b).

8. Signature of Immediate Family Member Returning the Ballot \_\_\_\_\_

Relationship to Voter \_\_\_\_\_  
(Complete Section #8 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 in reading and/or signing 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 \_\_\_\_\_