

# New York Village Absentee Ballot Application

Please print clearly. See detailed instructions.

This application must either be personally delivered to your village clerk's office not later than the day before the election, or, if mailed, not later than the 7th day before election day. The ballot itself must either be personally delivered to the village clerk's office no later than the close of polls on election day.

CLERK USE ONLY:

VILLAGE Dist: \_\_\_\_\_

Registration No: \_\_\_\_\_

Party: \_\_\_\_\_

voted in office

1. I am requesting, in good faith, an absentee ballot due to (check one reason):

- |   |  |
|---|--|
| <input type="checkbox"/> absence from the village on election day   | <input type="checkbox"/> resident or patient of a Veterans Health Administration Hospital  |
| <input type="checkbox"/> temporary illness or physical disability   |  |
| <input type="checkbox"/> permanent illness or physical disability   | <input type="checkbox"/> detention in jail/prison, awaiting trial, awaiting action by a grand jury, or in prison for a conviction of a crime or offense which was not a felony |
| <input type="checkbox"/> duties related to primary care of one or more individuals who are ill or physically disabled |  |

2. absentee ballot(s) requested for the following election(s) :

- Primary Election only       General Election only       Special Election only
- Any election held between these dates: absence begins: \_\_\_\_/\_\_\_\_/\_\_\_\_  
MM/DD/YYYY      absence ends: \_\_\_\_/\_\_\_\_/\_\_\_\_  
MM/DD/YYYY

3. last name or surname	first name	middle initial	suffix
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4. date of birth MM/DD/YYYY ____/____/____	county where you live	phone number (optional)	email (optional)
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5. address where you live (residence) street	apt	city	state	zip code
<b>NY</b>				

6. Delivery of Primary Election Ballot (check one)       Deliver to me in person at the board of elections

I authorize (give name): \_\_\_\_\_ to pick up my ballot at the board of elections.

Mail ballot to me at: (mailing address)

\_\_\_\_ street no.      street name      apt.      city      state      zip code

7. Delivery of General (or Special) Election Ballot (check one)       Deliver to me in person at the board of elections

I authorize (give name): \_\_\_\_\_ to pick up my ballot at the board of elections.

Mail ballot to me at: (mailing address)

\_\_\_\_ street no.      street name      apt.      city      state      zip code

## Applicant Must Sign Below

8. I certify that I am a qualified and a registered (and for primary, enrolled) voter; and that the information in this application is true and correct and that this application will be accepted for all purposes as the equivalent of an affidavit and, if it contains a material false statement, shall subject me to the same penalties as if I had been duly sworn.

Sign Here: **X** \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
MM/DD/YYYY

If applicant is unable to sign because of illness, physical disability or inability to read, the following statement must be executed: By my mark, duly witnessed hereunder, I hereby state that I am unable to sign my application for an absentee ballot without assistance because I am unable to write by reason of my illness or physical disability or because I am unable to read. I have made, or have the assistance in making, my mark in lieu of my signature. (No power of attorney or preprinted name stamps allowed. See detailed instructions.)

Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Name of Voter: \_\_\_\_\_ Mark: \_\_\_\_\_  
MM/DD/YYYY

I, the undersigned, hereby certify that the above named voter affixed his or her mark to this application in my presence and I know him or her to be the person who affixed his or her mark to said application and understand that this statement will be accepted for all purposes as the equivalent of an affidavit and if it contains a material false statement, shall subject me to the same penalties as if I had been duly sworn.

\_\_\_\_\_  
(address of witness to mark)

\_\_\_\_\_  
(signature of witness to mark)

Clerk's Use Only

## **Instructions:**

### **Who may apply for an absentee ballot?**

Each person must apply for themselves. It is a felony to make a false statement in an application for an absentee ballot, to attempt to cast an illegal ballot, or to help anyone to cast an illegal ballot.

**Where and when to return your application: Applications must be mailed seven days before the election, or hand-delivered to your village clerk by the day before the election.** If the address of your village hall is not provided on this form, contact information for your local village clerk's office.

**When your absentee ballot application can be accepted:** The first day the Village Clerk may accept an absentee ballot application is 4 months prior to the Village Election and the last day the clerk can accept an absentee ballot application through the mail is 7 days before the election date.

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