

TOWN OF PUTNAM VALLEY APPLICATION FOR ABSENTEE BALLOT

Application must be received by the Town Clerk at least 7 days before the election if the ballot is to be mailed to the voter, or the day before the election if the ballot is to be delivered personally to the voter.

IN ORDER TO RECEIVE AN ABSENTEE BALLOT, YOU MUST COMPLETE THE FOLLOWING INFORMATION:

_____ being affirmed say:

I reside at _____

1. I am, or will be, on the day of the Town election, a qualified voter in The Town of Putnam Valley Yes ___ No ___

2. I am, or will be, on the day of the Town election, over 18 years of age, a citizen of the United States, and will have resided in the district for 30 days next preceding the date of the election. Yes ___ No ___

3. I am a registered voter of the Town of Putnam Valley Yes ___ No ___

4. I will be unable to appear to vote in person on the day of the election because: (check one)

- a) _____ I will be on such day a patient in the hospital or unable to appear personally at the polling place because of illness or physical disability, or
- b) _____ My duties, occupation, or business require me to be outside of the county of my residence on such day, or
- c) _____ I will be on vacation outside the county of my residence on such day, or
- d) _____ I will be absent from my voting residence because I will be detained in jail awaiting trial, or
- e) _____ I will be confined in prison after conviction for an offense other than a felony, or
- f) _____ I am the (spouse, parent, child) of a qualified voter who has applied for, or is eligible to apply for an absentee ballot and will be absent on the day of the Town election by reason of accompanying or being with my (spouse, parent, child) entitled to apply for an absentee ballot for one of the reasons listed above.

5. If you have checked 4. b) above please complete a) or b) below:

- a) _____ If your duties, occupation, or business are of such nature as ordinarily require such absence, please give a brief description of such duties, occupation, or business: _____
- b) _____ If your duties, occupation, or business are not of such nature as ordinarily require such absence, please indicate the special circumstances on account of which such special absence is required:

6. If you checked 4. C) above please complete the following:

- a) date you expect to begin your vacation: _____
- b) date you expect to end your vacation: _____
- c) place or places you will be on vacation: _____
- d) answer one of the below:
 - 1. Name of Employer: _____
 - Address of Employer _____
 - 2. Are you self employed? Yes ___ No ___

7. Please indicate where your ballot is being mailed to you for voting:

I HEREBY DECLARE THAT THE FOREGOING IS A TRUE STATEMENT TO THE BEST OF MY KNOWLEDGE AND BELIEF, AND I UNDERSTAND THAT IF I MAKE ANY MATERIAL FALSE STATEMENT IN THE FOREGOING STATEMENT OF APPLICATION FOR ABSENTEE BALLOT, I SHALL BE GUILTY OF A MISDEMEANOR.

SIGNATURE: _____ DATE: _____