Application for Absentee Ballot
June 11th 2019
Special School Budget Election

Application Received
(Date/Time)

Ballot Sent/Delivered
(Date/Time)

1. Full Name of Registered Voter Requesting the Ballot _____

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

3. Voter's Date of Birth ___ ___ / ___ ___ / ___ ___ ___ ___
m m d d y y y y

4. Daytime Phone Number (optional) _____

5. Method of Delivery of Ballot to the Voter

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

☐ By Mail to this Address _____

☐ By Immediate Family Member of Voter

Designated Here _____ _____
(Name) (Relationship to Voter)

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

6. Signature of Voter *OR*
Immediate Family Member of Voter _____ Date _____

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 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 _____