

Village of Brockport Absentee Ballot Application

VILLAGE CLERK USE:

Please print clearly. See detailed instructions.

This application must either be personally delivered to the Village Clerk not later than the day before the special election or postmarked by a governmental postal service not later than 7 days before the special election. The ballot itself must either be personally delivered to the Village Clerk no later than the close of polls the day of the special election or postmarked by a governmental postal service not later than the day before the special election and received no later than the day of the special election.

1. I am requesting in good faith, an absentee ballot due to (check one reason):
- absence from county on Special Election Day
 - temporary illness or physical disability
 - permanent illness or physical disability
 - duties related to primary care of one or more individuals who are ill or physically disabled
 - patient or inmate in a Veterans' Administration Hospital
 - 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

2. Absentee ballot requested for the following election:
X Special Election only – dissolution referendum – Tuesday, MAY 24, 2016 Noon to 9pm

3. Last name: _____ First name: _____ Middle initial: _____ Suffix: _____

4. Date of birth: ____/____/____ County where you live: _____ Phone number (optional): _____

5. Address where you live (residence) street: _____ Apt: _____ City: _____ State: _____ Zip code: _____

6. Delivery of Special Election Ballot (check one)

- Deliver to me in person at Brockport Village Hall
- I authorize (give name): _____ to pick up my ballot at Brockport Village Hall.
- Mail ballot to me at: (mailing address) _____

Street no. _____ Street name _____ Apt. _____ City _____ State _____ Zip code _____

Applicant Must Sign Below

7. I certify that I am a qualified and a registered 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 ____/____/____

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: _____

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)

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.

Information for military and overseas voters:

If you are applying for an absentee ballot because you or your family is in the military or because you currently reside overseas, do not use this application. You are entitled to special provisions if you apply using the Federal Postcard Application. For more information about military/overseas voting, contact your local board of elections or refer to the Military and Federal Voting sections at: <http://www.elections.ny.gov/VotingMilitaryFed.html>

Where and when to return your application:

Applications must be mailed seven days before the special election, or hand-delivered to the Village Clerk by the day before the special election.

Options available to you if you have an illness or disability:

You may sign the absentee ballot application yourself, or you may make your mark and have your mark witnessed in the spaces provided on the bottom of the application. Please note that a power of attorney or printed name stamp is not allowed for any voting purpose.

When your ballot will be sent:

Your absentee ballot materials will be sent to you at least 32 days before the special election in which you are eligible to vote. If you applied after this date, your ballot will be sent immediately after your completed and signed application is received and processed by the Village Clerk.

If you prefer, you may designate someone to pick up your ballot for you, by completing the required information on the application. Contact the Village Clerk if you have not received your ballot.

Direct questions to:

Leslie Ann Morelli, Village Clerk
Village of Brockport
49 State Street
Brockport, NY 14420
585-637-5300 X12 phone
lmorelli@brockportny.org email

Statement of Agent

I, _____ residing at
(Print name)

_____ hereby accept and
(Street no., street name, city/town/village and zip code)

did receive an absentee ballot for _____ as authorized above.
(Name of voter)

Dated: _____, 2016

(Signature of Agent)