

State of Maine

Municipality of SEDGWICK

RECEIVED

Time: _____ a.m.
_____ p.m.

Date: _____ / _____ 20

Application for Absentee Ballot

MUNICIPAL ELECTION

MARCH 6, 20 15

I, _____, a registered voter of

(Full Name)

_____, Maine, am

(Street Address)

(Municipality)

☐ enrolled in the _____ party, or

(Name of Party)

☐ not enrolled in a political party but wish to be enrolled in the _____ party.

(Name of Party)

I request an absentee ballot because I believe that I will be unable to vote in person at the voting place on election day or because I otherwise meet the requirements to vote by absentee ballot. (Other requirements include: religious beliefs; confinement in a nursing home, boarding home or congregate housing unit; and marginal literacy. **NO REASON NEED BE INDICATED ON THIS FORM.** (21-A MRSA §751).)

A. Send ballot to me at _____

(Street Address, Municipality, State, Zip Code)

OR

B. Deliver ballot to _____

(3rd Person designated to receive ballot for personal delivery to me)

Signature of Voter Or

Date: _____ Immediate Family Member: _____

(Family member - Please also state family relationship)

AIDE CERTIFICATE (Complete if helped by an Aide)

If you received assistance in reading and/or signing this application, the person who assisted you must print and sign their name here:

I helped this voter either read and/or sign this application.

(Signature of Aide)

(Printed Name of Aide)

~WARNING~

A PERSON WHO FALSELY COMPLETES, SIGNS OR ALTERS AN ABSENTEE BALLOT APPLICATION OR ENVELOPE, OR BY DECEPTION CAUSES ANOTHER TO DO SO, HAS COMMITTED FORGERY (TO DO SO IS A CRIME)

DO NOT ENCLOSE THIS APPLICATION WITH THE VOTED BALLOT

This portion to be completed by the municipality where you are registered to vote

MUNICIPAL CERTIFICATION

I Certify that this applicant ☐ **OR** ☐ **is not** a registered voter and, if applicable:

☐ **IS** enrolled in the _____ party. (Includes voters who enrolled via this application.)

☐ **is NOT** enrolled in any political party.

(Signed by Registrar of Municipal Clerk)

(Name of Municipality)

(Date)

PLEASE NOTE

A **signed** request by the voter or a member of the voter's immediate family (received as an original or by fax) is sufficient for the municipal clerk to issue an absentee ballot by mail or in person to the voter or to the immediate family member making the request, or to a 3rd person designated on the other side. An immediate family member is not considered a 3rd person, but should sign in place of the voter, and must indicate the family relationship. **A 3RD PERSON CANNOT BE A CANDIDATE OR MEMBER OF A CANDIDATE'S IMMEDIATE FAMILY.**

Ballot sent/delivered on: _____ **(Date/Time)**

Ballot returned on: _____ **(Date/Time)**