

 **Clifton Park-Halfmoon Public Library Absentee Ballot Application**

**2018 Budget Vote & Trustee Election**

Please print clearly. See detailed instructions on back.

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Phone \_\_\_\_\_

**I am a registered voter in Saratoga County** and do now apply for an absentee Ballot for the Library District budget vote and election for which I am qualified. I know of no reason why I am no longer qualified to vote.

**I will be absent from Saratoga County** on the day of the Library Budget Vote and Trustee Election for **one** of the following reasons:

- 1. Business
- 2. Vacation
- 3. Education (School outside Saratoga County)
- 4. Temporary Illness (Home)
- 5. Temporary Illness (Hospital)
- 6. I will be detained in jail/prison for an offense other than a felony or awaiting trial or grand jury action.
- 7. I am Permanently Disabled or Confined (Statement below must be completed)

<b>Dates out of County</b> From _____ to _____ Where you will be on budget vote day _____
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**Statement of Permanent Disability or Confinement**

State nature of illness or disability \_\_\_\_\_

I am permanently confined at \_\_\_\_\_  
(Name of Institution or residence if confined at home)

**Delivery of Special Election Ballot; 2018 Clifton Park-Halfmoon Public Library Budget Vote and Trustee Election. (Check one)**

- Deliver to me in-person at Library (after August 21, 2017)
- I authorize (give name) \_\_\_\_\_ to pick up my ballot at the Clifton Park-Halfmoon Public Library.
- Mail ballot to me at mailing address above.

If different than above: \_\_\_\_\_ NY \_\_\_\_\_  
Street Apt. City State Zip

**Applicant Must Sign Below**

I certify that I am 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** \_\_\_\_\_ **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.

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

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

<b>STAFF USE ONLY:</b> Rec'd by _____ Date & Initial	Verify Address: <b>CP HM</b> Circle one	Information Entered in Vote DB _____ Date & Initial
<b>AB Ballot: Please Check ID!</b> <input type="checkbox"/> Given to Applicant <input type="checkbox"/> Given to Authorized Person <input type="checkbox"/> Needs to be Mailed _____ Date & Initial		

## **Absentee Ballot Application Instructions for 2018 Budget Vote & Trustee Election**

Please complete the application indicating the reason you are unable to attend the **Library's Budget Vote and Trustee Election** taking place on **Thursday, September 14, 2017**.

Once complete, you can receive your ballot by either mailing the application back to the Library (address below) or bringing it to the Circulation Desk. **Absentee Ballots will be available beginning Monday, August 21 once Trustee candidate information is known.** If you wish to have a ballot mailed to you we need to receive your application no later than **Tuesday, September 5**.

Please bring identification with you to pick up the absentee ballot personally or if you have been designated by another absentee voter. **You may not pick up an absentee ballot for another person unless authorized on the Absentee Ballot Application.** You may return the application as late as 7:00 pm on Wednesday, September 13, 2017.

Unless you have applied for an absentee ballot as a permanently disabled person, this application is good only for the special annual budget vote and trustee election to which it specifically pertains. You must, unless permanently disabled, renew your application for each special annual budget vote and trustee election if you are still eligible to vote absentee.

### **Clifton Park-Halfmoon Public Library**

475 Moe Road

Clifton Park, NY 12065