SCHOOL BUDGET VALIDATION REFERENDUM ELECTION AND SPECIAL MUNICIPAL ELECTION
Application for Absentee Ballot
Tuesday, June 11, 2019

Application Received
(Date/Time)

Application Sent
(Date/Time)

An absentee ballot request must be received by the Municipal Clerk by the close of business on **Thursday, June 6, 2019,** unless special circumstances exist.

Voted absentee ballots must be received by the Municipal Clerk by 8:00 p.m. on June 11, 2019

1. Full Name of Registered Voter Requesting the Ballot_____
2. Residence Address of Voter _____, Scarborough
   [Street Address]
3. Voter's Date of Birth _____/_____/_____
4. Daytime Phone Number (optional)_____
5. Method of Delivery of Ballot to 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 _____

   Note: If an immediate family member of the voter is completing this application, the relationship to the voter must be provide in 5(c) above. The absentee ballot can be delivered to the immediate family member in person or mailed to the address provided in 5(b).
7. Signature of Immediate Family Member Returning the Ballot_____

   Relationship to Voter _____

AIDE CERTIFICATE (Must be completed if Application 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 _____