



**Application for Absentee Ballot**  
**June 11, 2019 Municipal Referendum Election**  
**Town of Thomaston**

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.

<u>Application Received</u> (Date/Time)
<u>Ballot Sent/Delivered</u> (Date/Time)

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

1. Full Name of Registered Voter Requesting the Ballot: \_\_\_\_\_

2. Residence Address of Voter: \_\_\_\_\_ Thomaston  
(Street Address) (Municipality)

3. Voter's Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
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4. Daytime Phone Number (optional): \_\_\_\_\_

5. Method of Delivery of Ballot to the Voter

A. Issued to Voter (Application required if voter will vote **outside the Municipal Clerk's presence**)

B. By Mail to this Address: \_\_\_\_\_

C. By Immediate Family Member of Voter

Designated Here: \_\_\_\_\_  
(Name) (Relationship to Voter)

D. 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 provided 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: \_\_\_\_\_

(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: \_\_\_\_\_