APPLICATION FOR ABSENTEE BALLOT (Español en otro lado)

ED-3 Rev. 8/08 (You must complete a separate Application for each election, primary and referendum.)

Instructions: All applicants must fill out the information in sections 1, 2, 3, 4, and 6. If someone assists you in completing this application fill out section 7. Members of armed forces and electors temporarily residing overseas may also check one of the choices in section 5, if applicable. Return this completed application to your municipal clerk.

For Municipal Clerk's Use Only	
DONNA M. ANASTASIA TOWN CLERK TOWN OF WESTON P.O. BOX 1007 56 NORFIELD ROAD WESTON CT 06883	
Pol. Subdivision	**Voting District**
Check one ☐ **Mailed to Applicant** ☐ **Given to Applicant Personally**	
Date Ballot Issued	**Envelope Serial No.**

1. Purpose of Application

A. This application is for (*Check one*): ☐ Election ☐ Primary ☐ Referendum

B. Date of Election, Primary or Referendum: _____

C. If for PRIMARY, specify party in which applicant is eligible to vote:

_____

2. Statement of Applicant

I, the undersigned applicant for absentee ballot believe that I am, or will be, eligible to vote at the election, primary or referendum indicated above and that I expect to be unable to appear at the required polling place during the hours of voting for the reason checked below: (*Check only one.*)

☐ My active service in the Armed Forces of the United States
☐ My absence from the town during all of the hours of voting
☐ My illness
☐ My religious tenets forbid secular activity on the day of the election, primary or referendum
☐ My duties as a primary, election or referendum official at a polling place other than my own during all of the hours of voting
☐ My physical disability

3. Applicant's Information

Name: _____ Tel. No. _____

Voting Address: _____ Date of Birth _____

(Number, Street, Town)

4. Delivery of Absentee Ballot

The set of absentee voting forms shall be: (*Check only one.*)

☐ Given to me in person at the town clerk's office ☐ Mailed to me (If different from voting address fill in below):

Mailing Address: _____

(Fill in mailing address only if the mailing address is different from the voting address above.)

5. *(This section to be used by Members of the Armed Forces and Electors Temporarily Residing Overseas only)*

☐ I am a member of the armed forces or the spouse or dependent living where such member is stationed, who, due to military contingencies needs additional time to vote by absentee ballot. I therefore request that a blank absentee ballot be issued to me beginning 90 days before the regular election. I understand that if the military contingency ceases to exist, I may apply for an additional ballot with candidates printed on it.

☐ I am an elector of the above municipality who is (1) temporarily living or expects to be living or traveling outside the territorial limits of the United States before and on election day or (2) a member of the armed forces or the spouse or dependent living where such member is stationed, and request that a blank absentee ballot, together with a complete list of candidates and questions be issued to me (approximately 45 days before an election and 30 days before a primary). If this application reaches the municipal clerk after the time of availability of regular absentee ballots, I understand that I will be sent a regular ballot with candidates printed on it.

6. Applicant's Declaration

I declare, under the penalties of false statement in absentee balloting, that the above statements are true and correct, and that I am the applicant named above. *(Sign full legal name. If you are unable to write, you may authorize someone to write your name and the date in the spaces provided, followed by the word "by" and the signature of the authorized person. Such person must also complete section 7 below.)*

Signature of Applicant: _____ Date Signed: _____

7. Declaration of person providing assistance *(Completed by any person who assists with completion of application)*

I sign this application under penalties of false statement in absentee balloting.

Signature: _____ Printed Name: _____

Residence Address: _____ Tel. No: _____

Penalties for False Statements

A person is guilty of false statement in absentee balloting when he intentionally makes a false written statement in or on or signs the name of another person to the application for an absentee ballot or the inner envelope accompanying any such ballot, which he does not believe to be true and which statement or signature is intended to mislead a public servant in the performance of his official function. False statement in absentee balloting is a class D felony. The sentence for a class D felony shall be at least one year but may not exceed five years in prison. A fine for the conviction of a class D felony shall not exceed five thousand dollars.

*Absentee ballot sets are to be provided by the municipal clerk beginning **31** days before an election, **21** days before a primary, or **19** days before a referendum, upon application properly made. Blank ballots may be sent out to certain military persons beginning **90** days before a regular election and to Connecticut electors temporarily residing outside the U.S. and all military persons beginning approximately **45** days before a regular election, approximately **30** days before a primary and as soon as a complete list of candidates and questions is available before a special election.*

This application is to be returned to the municipal clerk of the municipality in which you are a registered voter. If your municipal clerk has a fax machine, you may fax this application to the clerk but must also mail this completed application with your original signature to the clerk, either separately or with your absentee ballot. If your application with your original signature is not received by the close of the polls on the day of the election, primary, or referendum, your absentee ballot will not be counted.