

**APPLICATION FOR ABSENTEE BALLOT FOR TOWN OF CHEBEAGUE  
ISLAND MUNICIPAL ELECTION ON JUNE 11, 2013.**

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

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

3. Voter's Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_\_  
m m / d d / y y y y

4. Daytime Phone Number (optional): \_\_\_\_\_

5. Method of Delivery of Ballot to the Voter:

In Person (Application Required Only 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 3<sup>rd</sup> Person (Designated by the Voter):

\_\_\_\_\_  
(Name) (Telephone #)

6. Signature of Voter OR Immediate Family Member of Voter:

\_\_\_\_\_  
(Signature) (Date)

7. Signature of Immediate Family Member Returning the Ballot

\_\_\_\_\_  
(Signature) (Date) (Relationship to Voter)  
(Complete Section #7 only if ballot delivered to voter or a different immediate family member of 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

Return or Mail application to: Town of Chebeague Island  
192 North Road  
Chebeague Island, ME 04017

Date Application Received: \_\_\_\_\_

Date ballot Sent: \_\_\_\_\_