	Town/City of
	Application for Town/City Election Absentee Ballot-RSA 657:4
	Absence, Religious Observance. or Disability (Uniformed and Overseas Citizen Voters Residing Outside the U.S. use the federal post card application)
For	I. I hereby declare that (check one):
Official	
Use Only	□ I am a duly qualified voter who is currently registered to vote in this town/ward.
Voter Not	$\Box$ I am absent from the town/city where I am domiciled and will be until after the next election,
registered	or I am unable to register in person due to a disability, and request that the forms necessary for
	absentee voter registration be sent to me with the absentee ballot.
	II. I will be entitled to vote by absentee ballot because (check one):
	□ I plan to be absent on the day of the election from the city, town, or unincorporated place
	where I am domiciled.
#	$\Box$ I am confined in a penal institution for a misdemeanor or while awaiting trial.
Voter ID #	□ I am requesting a ballot for the presidential primary election and I may be absent on the
otei	
>	day of the election from the city, town, or unincorporated place where I am domiciled, but
	the date of the election has not been announced. I understand that I may only make such a
	request 14 days after the filing period for candidates has closed, and that if I will not be
Date Returned: //	absent on the date of the election I am not eligible to vote by absentee ballot.
urn 	□ I cannot appear in public on election day because of observance of a religious commitment.
Ret	$\Box$ I am unable to vote in person due to a disability.
te I /	$\Box$ I cannot appear at any time during polling hours at my polling place because of an
Da	employment obligation. For the purposes of this application, the term "employment" shall
	include the care of children and infirm adults, with or without compensation.
	For use only on the Monday immediately prior to the election: I cannot appear at my
Date Mailed:	polling place on election day because the National Weather Service has issued a winter storm
M <sup>2</sup>	warning, blizzard warning, or ice storm warning for election day applicable to my city, town,
_/_	or unincorporated place and either (check one):
D <sup>2</sup>	□ I am elderly or infirm or I have a physical disability, and would otherwise vote in person
	but I have concerns for my safety traveling in the storm.
	□ I anticipate that school, child care, or adult care will be canceled, and would otherwise
	vote in person but will need to care for children or infirm adults.
	1 I
	Any person who votes or attempts to vote using an absentee ballot who is not entitled to
	vote by absentee ballot shall be guilty of a misdemeanor. RSA 657:24
	III. I am requesting an official absentee ballot for the following election (check <u>only</u>
	one):
	$\Box$ Town/City Election to be held on:///
e e:	
am	
Z Z	Turn Over – You Must Complete the back side
Last Name: First Name:_	
II	
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Last Name	First Name	Middle Name	(Jr., S	Sr., II,III)
Applicant's Voting	Domicile (home) Address:			
Street Number	Street Name Apt/Unit	City/Town	Ward	Zip Coc
Mail the ballot to me	e at this address ( <b>if different th</b>	an the above home	address)	
Street or PO Box #	Street name Apt/Unit	City/Town	State	Zip Co
	Number: () per where you can be contacted		ion day is	preferred
Applicant's Email A	Address:	@		
Applicant's Signatu	re:	Date Signed	:	
and assists a voter w	sign this form to receive an ab with a disability in executing the provided on the application for	<u>ais form shall print a</u>		
and assists a voter w name in the space p		nis form shall print a m.	nd sign hi	<u>s or her</u>
and assists a voter w name in the space p I attest that I assisted	vith a disability in executing th provided on the application for	nis form shall print a m. s form because he/she	end sign hi	<u>s or her</u> ability.
and assists a voter w name in the space p I attest that I assisted Signature	<i>with a disability in executing the provided on the application form</i> d the applicant in executing this	<u>nis form shall print a</u> <u>m.</u> s form because he/sho	end sign hi	ability.
and assists a voter w name in the space p I attest that I assisted Signature Mail/fax/email or h	vith a disability in executing the provided on the application formed on the application formed of the applicant in executing thisPrint Name	nis form shall print a m. s form because he/sha e rm to your local Cit	end sign hi	ability.
and assists a voter w name in the space p I attest that I assisted Signature Mail/fax/email or h For clerk addresses Visit the web site: h receipt of your appli date the clerk receiv absentee ballot was	vith a disability in executing the provided on the application form d the applicant in executing this Print Name and deliver this completed fo	<b>bis form shall print a m. s</b> form because he/shall print a <b>s</b> form because he/shall <b>rm to your local Cit sos.nh.gov our absentee ballot.</b> Your absentee ballot wallot, and after the elect Contact your clerk if	nd sign hi e has a disa ty/Town C You may v as mailed t ction learn you have	s or her ability. Clerk. erify o you, th if your question
and assists a voter w name in the space p I attest that I assisted Signature Mail/fax/email or h For clerk addresses Visit the web site: h receipt of your appli date the clerk receiv absentee ballot was	with a disability in executing the provided on the application form d the applicant in executing this Print Name hand deliver this completed for s and fax numbers: https://app ttps://app.sos.nh.gov to track you ication, obtain the date when you res your completed absentee bal rejected/not counted and why. hation on the "Voter Informatio	<b>bis form shall print a m. s</b> form because he/shall print a <b>s</b> form because he/shall <b>rm to your local Cit sos.nh.gov our absentee ballot.</b> Your absentee ballot wallot, and after the elect Contact your clerk if	nd sign hi e has a disa ty/Town C You may v as mailed t ction learn you have	s or her ability. Clerk. erify o you, th if your question