New York State Absentee Ballot Application					BOARD USE ONLY:		
Village of Chestnut Ridge					Town Dist		
277 Old Nyack Turnpike			845-425-28	305	CD AD LI		
Chestnut Ridge, NY 10977			del@chestnutridg	el@chestnutridgevillage.org			
Please print clearly. See detailed instructions. Village Party							
This application must either be personally delivered to your Village Hall not Reg. #							
later than the day before the election. The ballot itself must either be personally delivered to the Village Clerk no later than the close of polls on					P	G	
•	tion Day.						
					Entered:		
					Issued:		
1.	last name or surname	first name	middle initial	suffix	Mailed:		
					Voted in office		
address where you live (residence) street apt. city state zip code county where NY						where you live	
				141			
3.	date of birth / /	telephone numbers: home: work:	cell		email address:		
		none.	uc.				
Absentee ballot(s) requested for the following election(s):							
	Primary Election only General Election only Special Election only						
	☐ Primary Election only ☐ General Election only ☐ Special Election only						
	Village Election						
5.	I am requesting, in good faith, ar	n absentee ballot due t	o (check one	reason):			
	Absence from county on election day Patient or inmate in a Veterans' Administration Hospital						
	Temporary illness or physical disability			Detention in jail/prison, awaiting trial, awaiting			
	Permanent illness or physical	action by a grand jury, or in prison for a conviction of a crime or offense which was not a felony.					
	Duties related to primary care						
	individuals who are ill or phys						
6.	Delivery of Village Election Ballo	Deliver to me in person at Village Hall. _to pick up my ballot at the Village Hall.					
	I authorize (give name):						
	Mail ballot to me at: (mailing	address)					
	street no. street name		apt.	. с	ity state	zip	
7.	7 Delivery of Primary General (or Special) Election Ballot (check one) Deliver to me in person at Village Hall						
	l authorize (give name):			to pick u	ıp my ballot at Village Hall.		
	Mail ballot to me at: (mailing	address)					
	street no. street name		apt.	ci	ity state	zip	
A so s			apt.		nty State	Zip	
App	olicant Must Sign Below	<u> </u>					
	I certify that I am a qualified and					1	
	application is true and correct an and, if it contains a material false					1	
	Sign Here: X				Date/_	,	
	Sign riere. A				Date	/ —	
If app	licant is unable to sign because of illne	ess, physical disability or in	nability to read	d. the followir	ng statement must be executed	d: Bv mv	
mark,	duly witnessed hereunder, I hereby s	tate that I am unable to si	gn my applica	tion for an ab	sentee ballot without assistan	ce because 1	
am unable to write by reason of my illness or physical disability or because I am unable to read. I have made, or have the assistance in making, my mark in lieu of my signature. (No power of attorney or preprinted name stamps allowed. See detailed instructions.)							
Date	//_Name of Voter:		Mark	c:			
	undersigned, hereby certify that the a be the person who affixed his or her						
the equivalent of an affidavit and if it contains a material false statement, shall subject me to the same penalties as if I had been duly							
sworn						_	
	(address of witness to mark)			(sign	nature of witness to mark)		

Instructions:

Who may apply for an absentee ballot?

Each person must apply for themselves. It is a felony to make a false statement in an application for an absentee ballot, to attempt to cast an illegal ballot, or to help anyone to cast an illegal ballot.

Information for military and overseas voters:

If you are applying for an absentee ballot because you or your family is in the military or because you currently reside overseas, do not use this application. You are entitled to special provisions if you apply using the Federal Postcard Application. For more information about military/overseas voting, contact your local board of elections or refer to the Military and Federal Voting sections at: http://www.elections.state.ny.us/Voting.html.

Where and when to return your application:

Applications must be mailed seven days before the election, or hand-delivered to your Village Hall by the day before the election. The address of your Village Hall is provided on the front of this form. Additional information can be found on the Rockland County Board of Elections website at www.voterockland.com or by calling 845-638-5172.

Options available to you if you have an illness or disability:

If you check the box indicating your illness or disability is permanent, once your application is approved you will automatically receive a ballot for each election in which you are eligible to vote, without having to apply again. You may sign the absentee ballot application yourself, or you may make your mark and have your mark witnessed in the spaces provided on the bottom of the application. Please note that a power of attorney or printed name stamp is not allowed for any voting purpose.

When your ballot will be sent:

Your absentee ballot materials will be sent to you at least 32 days before federal, state, county, city or town elections in which you are eligible to vote. If you applied after this date, your ballot will be sent immediately after your completed and signed application is received and processed by your local board of elections. If you prefer, you may designate someone to pick up your ballot for you, by completing the required information in section 6 and/or section 7, as appropriate. Contact your local Village Hall if you have not received your ballot.