REQUEST FOR ABSENTEE/EARLY BALLOT

Voter's Name:		
Legal Address:	Mailing Address:	
Which ELECTION(S) are you request	ing for?	
Annual Meeting	Special Meeting	
Primary Election	General Election	
Presidential Preference Prima	ary (Circle party: Democratic/Republic	can)
Ballot Delivery Method:		
Voted in OfficePic	ked up ballot Mail ballot to):
	neone else, you must complete this sections and ress:	on:
Relationship to Voter: Family N	MemberHealth Care Provider	Person Authorized by voter
Signature		Date
Signature		Date
	FOR CLERK USE ONLY	
	FOR CLERK USE ONLY	
Signature	FOR CLERK USE ONLY	