

**TOWN OF BOOTHBAY HARBOR
APPLICATION FOR ABSENTEE BALLOT
BOOTHBAY-BOOTHBAY HARBOR COMMUNITY SCHOOL DISTRICT
JUNE 10, 2025 REFERENDUM ELECTION**

<u>Application Received</u> (Date/Time)
<u>Ballot Sent/Delivered</u> (Date/Time)

(A Special Circumstances Application is required after the 3rd business day before election day)

**MAINE ELECTION LAW PERMITS ANY REGISTERED VOTER
TO CAST AN ABSENTEE BALLOT AT ANY ELECTION**

1. Full Name of Registered Voter Requesting the Ballot: _____
2. Residence Address of Voter: _____ **Boothbay Harbor**
3. Voter's Date of Birth: ____ / ____ / ____ (if application by telephone request)
4. Daytime Phone Number (optional): _____
5. If the Registered Voter is a uniformed services voter or overseas voter covered by the federal Uniformed and Overseas Citizens Absentee Voting Act, 52 United States Code, Chapter 203, check here: ____
6. Party affiliation of the Registered Voter, if any: _____
7. 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 3rd Person: (Designated by the Voter in an application signed by the Voter) _____

(N/A for telephone applications.)
(Name)
8. Signature of Voter OR Immediate Family Member of Voter _____

(Name of Immediate Family Member, if applicable)
(Relationship to Voter, if applicable)
(Date)
9. (Complete Section # 9 only if Ballot was delivered to the Voter or a different immediate family member of the Voter)
 Signature of Immediate Family Member Returning the Ballot: _____
 Relationship to 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
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WARNING:

**A PERSON WHO FALSELY COMPLETES, SIGNS OR ALTERS AN ABSENTEE BALLOT APPLICATION OR ENVELOPE, OR BY DECEPTION CAUSES ANOTHER TO DO SO, HAS COMMITTED FORGERY
(A CLASS C OR D CRIME UNDER MAINE LAW)**

DO NOT ENCLOSE THIS APPLICATION WITH THE VOTED BALLOT