	Town/City of <u>CHESTER</u>
他当初	Application for Town/City Election Absentee Ballot-RSA 657:4
(the second seco	Absence, Religious Observance, or Disability
	(Uniformed and Overseas Citizen Voters Residing Outside the U.S. use the federal post card application)
For	1. I hereby declare that (check one):
Official	□ I am a duly qualified voter who is currently registered to vote in this town/ward.
Use Only Voter Not	□ I am absent from the town/city where I am domiciled and will be until after the next election of I am unable to
registered	or Lam unable to register in porson due to a dischilit
Г	or I am unable to register in person due to a disability, and request that the forms necessary
	absentee voter registration be sent to me with the absentee ballot.
	II. I will be entitled to vote by absentee ballot because (check one):
	\Box I plan to be absent on the day of the election from the city, town, or unincorporated plac
	where I am domiciled.
# 0	\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
Vote	day of the election from the city, town, or unincomparated along 1 may be absent on the
-	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
led	absent on the date of the election I am not eligible to vote by absentee ballot.
un	□ I cannot appear in public on election day because of observance of a religious commitme
Set	\Box I am unable to vote in person due to a disability.
Date Returned:	□ 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 Workling of the election: I cannot appear at my
Ma	polling place on election day because the National Weather Service has issued a winter stor warning blizzard warning arrive storm.
te /	warning, blizzard warning, or ice storm warning for election day applicable to my city, tow
Da	or unincorporated place and either (check one):
	□ I am elderly or infirm or I have a physical disability, and would otherwise vote in personant to have a physical disability.
	but I have concerns for my safety traveling in the storm.
ested:	I anticipate that school, child care, or adult care will be canceled and would otherwi
lest	vote in person but will need to care for children or infirm adults
Date Requ	Any person who votes or attempts to vote using an absentee ballot who is not entitled
Re	vote by absentee ballot shall be guilty of a misdemeanor. RSA 657:24
ate	III. I am requesting an official absentee ballot for the following election (check <u>only</u>
	one):
	ι
	$\mathbb{E}^{\mathcal{F}}$
	Town/City Election to be held on: $03/08/2022$
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am	
デラー	Turn Over – You Must Complete the back side
ast N irst N	
Last Name: First Name:	
Last N First N	Page 1 - 62
Last Name: First Name:	Page 1 of 2

Last Name	First Na	me	Middle Name	e (Jr., 1	Sr., II,III)
Applicant's Voting J	Domicile (home)	Address:			
Street Number	Street Name	Apt/Unit	City/Town	Ward	Zip Coo
Mail the ballot to me	e at this address (i	if different t	han the above home	e address)	
Street or PO Box #	Street name	Apt/Unit	City/Town	State	Zip Co
Applicant's Phone N (Cell phone or numb	lumber: () er where you can	be contacted	l prior to and on elec	tion day is _l	preferred
Applicant's Email A					
The applicant must s and assists a voter w	e: sign this form to ith a disability in	receive an all executing th	bsentee ballot. <u>Any p</u> his form shall print a	nerson who	witness
The applicant must s <u>and assists a voter w</u> name in the space pr	e: sign this form to ith a disability in rovided on the ap	receive an a executing the plication for	bsentee ballot. <u>Any p</u> nis form shall print a <u>m.</u>	person who and sign his	<u>witness</u> s or her
<i>and assists a voter w</i> <i>name in the space pr</i> I attest that I assisted	e:	receive an an executing the plication for executing this	bs <i>entee ballot. <u>Any p</u> his form shall print a <u>m.</u> s form because he/sh</i>	<u>person who</u> und sign his e has a disa	<u>witness</u> <u>s or her</u> bility.
<i>The applicant must s <u>and assists a voter w</u> <u>name in the space pr</u> I attest that I assisted Signature</i>	e: <i>sign this form to</i> <i>ith a disability in</i> <i>rovided on the ap</i> the applicant in e	receive an an executing the plication for executing this Print Name	bs <i>entee ballot. <u>Any p</u> his form shall print a <u>m.</u> s form because he/sha</i>	person who and sign his e has a disa	<u>witness</u> <u>s or her</u> bility.
The applicant must s <u>and assists a voter w</u> name in the space pr	e:	receive an an executing the plication for executing this Print Name completed for	bsentee ballot. <u>Any p</u> his form shall print a <u>m.</u> s form because he/sha e orm to <u>your local Ci</u>	<u>person who</u> und sign his e has a disa ty/Town C	<u>witness</u> <u>s or her</u> bility. ler <u>k</u> .
The applicant must s and assists a voter w name in the space pr I attest that I assisted Signature Mail/fax/email or ha	e:	receive an an <u>executing the</u> <u>plication for</u> executing this Print Name completed for rs: <u>https://app ov/Public/Ab</u> application, eceives your vas rejected/n	bsentee ballot. <u>Any p</u> <u>his form shall print a</u> <u>m.</u> s form because he/sha s form to <u>vour local Ci</u> <u>soss.nh.gov/Public/C</u> <u>senteeBallot.aspx</u> to obtain the date wher completed absentee h ot counted and why	<u>person who</u> <u>ind sign his</u> e has a disa ty/Town C ElerkDetails track your a ballot, and a Contact yo	bility. bility. bility. bility. bility. bility. bility.
The applicant must s and assists a voter w name in the space pr I attest that I assisted Signature Mail/fax/email or ha For clerk addresses Visit the web site: <u>htt</u> ballot. You may veri was mailed to you, th election learn if your if you have questions	e:	receive an an <u>executing the</u> <u>plication for</u> executing this Print Name completed for rs: <u>https://app ov/Public/Ab</u> application, eceives your vas rejected/n	bsentee ballot. <u>Any p</u> <u>his form shall print a</u> <u>m.</u> s form because he/sha s form to <u>vour local Ci</u> <u>soss.nh.gov/Public/C</u> <u>senteeBallot.aspx</u> to obtain the date wher completed absentee h ot counted and why	<u>person who</u> <u>ind sign his</u> e has a disa ty/Town C ElerkDetails track your a ballot, and a Contact yo	bility. bility. bility. bility. bility. bility. bility.

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