

SAUGERTIES PUBLIC LIBRARY ABSENTEE BALLOT REQUEST

All information requested must be completed.

Address in the Town of Saugerties:

Name _____

Address _____

I certify that I am a registered voter in the Town of Saugerties and do now apply for an absentee ballot for the annual Saugerties Public Library budget vote and trustee election on Thursday, September 4, 2008 from 4 until 8 p.m. I further certify that I am not able to appear in person to vote on that date or at that time.

I will be absent from the Town of Saugerties or unable to vote at the polling place for the following reason:

PLEASE CHECK ONE OF THE FOLLOWING REASONS:

____ Business/vacation

____ Education

____ Temporary illness

____ I am permanently confined/disabled.

____ Other (please explain) _____

SEND BALLOT (OR GIVE TO):

Name _____

Address _____

BALLOTS MUST BE RECEIVED AT THE LIBRARY BY THE CLOSE OF VOTING ON THURSDAY, SEPTEMBER 4, 2008.

I certify that the information on this application will be accepted for all purposes as 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.

DATE

SIGNATURE OF VOTER

For staff use only:

____ Ballot number