



# Application for Absentee Ballot

## June 11<sup>th</sup>, 2024

### Town Of Brownfield

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

**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 \_\_\_\_\_  

(Street Address)
(Municipality)
3. Voter's Date of Birth    /    /    /     

m
m
d
d
y
y
y
y
4. Daytime Phone Number (optional): \_\_\_\_\_
5. 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 3<sup>rd</sup> Person (Designated by the Voter): \_\_\_\_\_  

(Name)
(Telephone #)

6. Signature of Voter *OR*  
**Immediate Family Member of Voter** : \_\_\_\_\_ Date \_\_\_\_\_

7. Signature of Immediate Family Member Returning the Ballot \_\_\_\_\_  
 Relationship to Voter: \_\_\_\_\_  
(Complete Section #8 Only if Ballot was Delivered to the Voter or a Different Immediate Family Member of the 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 \_\_\_\_\_

**DO NOT ENCLOSE THIS APPLICATION WITH THE VOTED BALLOT**