STATE OF NEW HAMPSHIRE

Application for State Election Absentee Ballot-RSA 657:4

Absence, Religious Observance, or Disability

(Uniformed and Overseas Citizen Voters Residing Outside the U.S. use the federal post card application)

For
Official
Use
Only
Voter Not
registered

Voter ID#

Date Returned:

Date Mailed:

Date Requested:

I. I hereby declare that (check one):

☐ I am a duly qualified voter who is currently registered to vote in this town/ward.

☐ I am absent from the town/city where I am domiciled and will be until after the next election, or I am unable to register in person due to a disability, and request that the forms necessary for 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 place where I am domiciled.

I am confined in a penal institution for a misdemeanor or while awaiting trial.

□ I am requesting a ballot for the presidential primary election and I 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 absent on the date of the election I am not eligible to vote by absentee ballot.

☐ I cannot appear in public on election day because of observance of a religious commitment.

I am unable to vote in person due to a disability.

☐ I cannot appear at any time during polling hours at my polling place because of an 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 polling place on election day because the National Weather Service has issued a winter storm warning, blizzard warning, or ice storm warning for election day applicable to my city, town, or unincorporated place and either (check one):

 \Box I am elderly or infirm or I have a physical disability, and would otherwise vote in person but I have concerns for my safety traveling in the storm.

☐ I anticipate that school, child care, or adult care will be canceled, and would otherwise vote in person but will need to care for children or infirm adults.

Any person who votes or attempts to vote using an absentee ballot who is not entitled to vote by absentee ballot shall be guilty of a misdemeanor. RSA 657:24

III. I am requesting an official absentee ballot for the following election (check <u>only</u> one): *Required for Primary Elections: I am a member of, or I am now declaring my affiliation with a party and I am requesting a ballot for that party's primary (check only one):

□ *State Primary Election to be held on September 13, 2022

☐ Democratic Party ☐ Republican Party

 $\hfill \Box$ State General Election to be held on November 8, 2022

OR

Turn Over – You Must Complete the Page 2



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Last Name	First Name		Middle Nan	ne (Jr.,	Sr., II,III)
Applicant's Voting	Domicile (home)	Address:			
Street Number	Street Name	Apt/Unit	City/Town	Ward	Zip Code
Mail the ballot to me	e at this address (if different t	han the above hon	ne address)	
Street or PO Box #	Street name	Apt/Unit	City/Town	State	Zip Code
Applicant's Phone N (Cell phone or numb				ection day is	preferred)
Applicant's Email A					preferred
Applicant's Signatu					
and assists a voter v name in the space p I attest that I assisted	provided on the a	pplication fo	<u>rm.</u>		
Signature		Print Nam	ne		
Mail/fax/email or h	nand deliver this	completed f	orm to <u>your local</u>	City/Town (<u>Clerk</u> .
For clerk addresses	s and fax numbe	rs: <u>https://ap</u>	p.sos.nh.gov/Public	:/ClerkDetai	ls.aspx
Visit the web site: he ballot. You may ver was mailed to you, to election learn if you if you have question Absentee Ballot Sea	rify receipt of you the date the clerk or absentee ballot as regarding the in	or application receives you was rejected/	, obtain the date when completed absented and whom to counted and whom the counted are consistent as the counter counter and the counter counter and the counter	nen your abs ee ballot, and y. Contact	entee ballot l after the your clerk
For Official Use Or Voter Verified	ıly:				