

TOWN OF BOOTHBAY HARBOR  
APPLICATION FOR ABSENTEE BALLOT  
BOOTHBAY-BOOTHBAY HARBOR COMMUNITY SCHOOL DISTRICT  
APRIL 24, 2025 REFERENDUM ELECTION

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

(A Special Circumstances Application is required after the 3<sup>rd</sup> 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: \_\_\_\_\_ **Town of 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 3<sup>rd</sup> 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

**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**