APPLICATION FOR ABSENTEE BALLOT FOR REFERENDUM AUTHORIZED TO BE HELD

WITH LESS THAN THREE WEEKS NOTICE							
ED-3R REY 2/22 (Secs. 9-140 and 9-369c)					For Municipal Clerk's Use		
You must complete a separate Application for each referendum.							
This application is to be returned in person to municipal clerk of municipality in which you are a eligible to vote. Either you, or the proper person you designated on this form, must hand deliver this application to the municipal clerk.				OUTER ENVELOPE SERIAL NO.			
This application is ONLY for a reference a case, absentee ballots are to be made							
on are finalized.							
DATE OF REFERENDUM			GIVEN TO APPLICA PERSON				
NAME OF APPLICANT (Please print or type)	Applicant's Dale of Birth	RESIDENCE (VO	DTING) ADDRESS (No., street, town) POL. SUBD1VISION VOTING 'DISTRICT (if applicable) NO.				
STATEMENT OF APPLICANT I, THE UNDERSIGNED, a voter entitled to vote in the referendum indicated, do hereby state that I expect to be unable to appear at the required polling place during the hours of voting of the indicated referendum for the reason checked below: MY ACTIVE SERVICE IN THE ARMED FORCES			I hereby designate				
of the United States.			Such designee is (check one).				
☐ MY ABSENCE FROM THE TOWN			 a person caring for me because of my illness, including but not limited to a licensed physician or a registered practical nurse 				
SICKNESS PHYSICAL DISABILITY			a member of my family				
MY RELIGIOUS TENANTS which forbid secular activity on the day of the referendum.			a police officer in the municipality in which I reside				
MY DUTIES as a referendum official at a polling place other than my own during all of the hours of voting.			a registrar of voters or deputy registrar of voters in the municipality in which I reside.				
I, THEREFORE , APPLY for a set of absentee voting forms to be used at such referendum, which forms are:			STATEMENT OF DESIGNEE I, the designee named above, consent to such designation and will				
TO BE GIVEN TO ME PERS you apply in person to the Municipal	perform the delivery or deliveries indicated without tampering with the ballot in any way.						
 TO BE GIVEN TO MY DESIGNEE PERSONALLY as indicated herein, if applicable, for delivery to me. (Note: Designee must personally submit this application to the municipal clerk.) I DECLARE, under the penalties of false statement in absentee hellution the designee to be addressed or provide a delivery to be addres			(signature of designee) NOTE: The law requires the applicant to personally deliver or mail back to the municipal clerk the voted ballot unless (a) this form indi- cates the designee to return the ballot in person to the municipal clerk or (b) the applicant orally designates a qualified designee to mail it or				
balloting, that the above statements are true and correct, and that I am the applicant named above. (Sign your legal name in full. A mar-			return it as provided in the Instruction comes with the absentee ballot.				
ried woman must sign her own first name, not her husband's. If you are unable to write, you may authorize someone to write your <u>name and date in the spaces provided, followed by the word "by"</u> and the signature of the authorized person.) (sec. 9-140) <u>DATE SIGNED</u> SIGNATURE OF APPLICANT			PENALTIES FOR FALSE STATEMENTS (a] PERSONS ARE GUILTY OF FALSE STATEMENT IN ABSENTEE BAL- LOTING when they intentionally make a false statement on, or sign the name of another person to, the application for absentee voting forms. (Sec. 9-359a) (b] False statement in absentee balloting is a class D felony. (Sec. 9-359a) [c] A SENTENCE for a class D felony shall be at least one year but may not exeed five years in prison. (Sec. 53a-35a) [cl] A FINE for the conviction of a class D felony shall not exeed five thousand dollars. (Sec. 53a-41)				
X							

(To be completed by any person who assists another person in the completion of this application) I sign this application under penalties of false statement in absentee balloting.

 Signature
 Print or Type Name
 Residence Address
 Telephone No.