



ANNUAL BUDGET VOTE AND BOARD ELECTION

TUESDAY, May 19, 2020 (7am – 9pm)

High School Main Lobby

If you are going to be out of the District the day of the vote, please fill out the application below.

**Absentee Ballot Instructions: (Please read instructions carefully)**

Application must be returned with the applicant's ***original signature***. No faxes or emails will be accepted. After approval of the application by the District Clerk, a ballot is then mailed to the applicant. Please return your application to:

Carolyn Visintin, District Clerk  
William Floyd UFSD  
240 Mastic Beach Road  
Mastic Beach, NY 11951

After approval of application, the District Clerk will mail to the applicant the Absentee Ballot. Please call Carolyn Visintin with any questions at (631) 874-1117.

### Application for Absentee Ballot

Application must be received by the District Clerk at least 7 days before the election if the ballot is to be mailed to the voter, or the day before the election, if the ballot is to be delivered personally to the voter.

State of New York  
City or Town of  
County of

} ss.:

I, \_\_\_\_\_ being affirmed say:

I reside at \_\_\_\_\_

Street number (if any) or town

and rural delivery route (if any)

I am a qualified voter of the School District in which I reside in that:  I am or will be on such date, over 18 years of age, a citizen of the United States and have or will have resided in the district for thirty days next preceding such date  I am registered in the district.

I will be unable to appear to vote in person on the day of the School District election for which the absentee ballot is requested because I am or will be on such day:

(Complete one of the following subdivisions)

A.

A patient in a hospital, or unable to appear personally at the polling place on such day because of illness or physical disability.

B.

Because my duties, occupation, business or studies will require me to be outside of the county or city of my residence on such day.

1. Where such duties, occupation, business or studies are of such a nature as ordinarily to require such absence, a brief description of such duties, occupation, business or studies shall be set forth (description):

\_\_\_\_\_  
\_\_\_\_\_

2. Where such duties, occupation, business or studies are not of such a nature as ordinarily to require such absence, a statement must be given for the special circumstances to account for such absence.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

C.

I will be on vacation elsewhere on such day.

I expect that such vacation will begin on \_\_\_\_\_ Date

and end on \_\_\_\_\_ Date

and will be at the following named place or places. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name of Employer \_\_\_\_\_ Address \_\_\_\_\_

or self employed as a \_\_\_\_\_ Located at \_\_\_\_\_

or retired as of (date) \_\_\_\_\_

D.

I will be absent from my voting residence because

- I am detained in jail awaiting action by grand jury.
- I am awaiting trial.
- I am confined in a prison after conviction for an offense other than a felony.

E.

I am entitled to vote as an absentee voter in that I expect to be absent from the School District on the day of the School District election by reason of accompanying or being with the (check one)  spouse,  parent,  or child of, and reside in the same household with a person qualified to apply in that such a person (check one)  will be absent from the county of his residence due to his duties, occupation, business or studies and such absence is not caused by the fact that his regular daily place of business or studies is located outside such county, or  will be absent due to vacation,  a patient at a hospital,  detained in jail,  confined due to illness or physical disability.

The person through whom I claim to be so entitled (check one)  has  has not applied for an absentee ballot.

**I HEREBY DECLARE THAT THE FOREGOING IS A TRUE STATEMENT TO THE BEST OF MY KNOWLEDGE AND BELIEF, AND I UNDERSTAND THAT IF I MAKE ANY MATERIAL FALSE STATEMENTS IN THE FOREGOING STATEMENT OF APPLICATION FOR ABSENTEE BALLOTS, I SHALL BE GUILTY OF A MISDEMEANOR.**

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Date

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Signature of Voter or Mark