

CROTON-HARMON UNION FREE SCHOOL DISTRICT  
10 GERSTEIN STREET  
CROTON-ON-HUDSON, NY 10520

**Application for Military Ballot For Budget Vote/Election dated May 21, 2024**

BE ADVISED: Military voters must submit a separate military ballot application for each election at which they wish to cast a vote, except any necessary budget revote.

This application must be returned by mail or in person to the Office of the School District Clerk, , not later than 5:00 PM on the twenty-sixth (26<sup>th</sup>) day before the election for all school districts, except city school districts with less than 125,000 inhabitants in which case the application must be received not later than 5:00 PM on the fifteenth (15<sup>th</sup>) day before the election.

<b>1.</b>	I am requesting, in good faith, a military ballot because (check one reason): <input type="checkbox"/> I am in military service* and by reason of such military service will be absent on the day of the election <input type="checkbox"/> I am in military service and will be discharged from such military service within 30 days of the election <input type="checkbox"/> I am the (check one) ___ spouse, ___ parent, ___ child, or ___ dependent of such qualified military voter accompanying or being with the qualified military voter and am also a qualified voter and resident of the same school district
<b>2.</b>	Name: _____ last name or surname                      first name                                      middle initial                      suffix
<b>3.</b>	Residential Address in School District: _____ street address                                      city, town, village                                      state                      zip code
<b>4.</b>	Military Address: _____ street address                                      city                                      state                      zip code
<b>5.</b>	Preference for Receiving Military Ballot (check one): <input type="checkbox"/> Mail (specify Residential or Military Address) _____ <input type="checkbox"/> Email (provide email address) _____ <input type="checkbox"/> Fax (provide fax number) _____
<b>6.</b>	Military Voter Affirmation:  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 statement in the foregoing statement of application for ballots, I shall be guilty of a misdemeanor.  Signature of Voter _____ Date _____

\* Defined as "the military service of the state, or of the United States, including the army, navy, marine corps, air force, coast guard, merchant marine and all components thereof, and the coast and geodetic survey, the public health service, the national guard when in the service of the United States pursuant to call as provided by law, and the cadets or midshipmen of the United States Military Academy, United States Naval Academy, United States Air Force Academy and United States Coast Guard Academy."