BOE 1640F1

SHENENDEHOWA CENTRAL SCHOOL DISTRICT
MILITARY VOTER
APPLICATION FOR MILITARY BALLOT

I, _____, being affirmed say:

My Shenendehowa Central School District address is:

_____.

My military address is:

_____.

I am a qualified military voter of the Shenendehowa Central School District in which I reside and I am or will be eighteen (18) years of age or over as of the date of the next vote, I am a citizen of the United States, and I have or will have resided in the District for thirty (30) days preceding the next vote.

I will be unable to appear to vote in person on the day of the School District annual meeting for which the absentee ballot is requested because I am or will be on such day (select one of the following):

__(1) in military service.

__(2) discharged from military service within 30 days of the vote.

__(3) an eligible spouse, parent, child or dependent of a military voter.

Ballot delivery instructions (select one of the following):

__ Email ballot to me at _____

__ Fax ballot to me at: _____

__ Mail ballot to me at the above military mailing address.

If no email address or fax number is provided, the ballot will be mailed to you.

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 military ballots, I shall be guilty of a misdemeanor.

_____ _____
Signature of Voter Date