

**REQUEST FOR EARLY ABSENTEE VOTER BALLOT for (ONE YEAR ONLY)**

(All voters including military and overseas voters must now submit a new request for absentee ballots each year.)  
 (SUBMIT DIRECTLY by fax, email or mail to the Town Clerk of the town in which you are on the voter checklist.)

**FOR Civilian Voters Living in the U.S.:**

Voter's Name: \_\_\_\_\_ (First, Middle, Last Name)

Check if last name is different than when you registered to vote--Former Name: \_\_\_\_\_

Voter's Current Mailing Address: \_\_\_\_\_

Voter's Town of Residence: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

(Contact Only - NOT for Ballot Delivery)

I request early absentee voter ballot(s) for the election(s) checked below: (select Pres. Primary in Presidential Election years)

- |   |  |
|---|--|
| <input type="checkbox"/> Annual Town Meeting  | <input type="checkbox"/> August Primary Election   |
| Presidential Primary (1st Tuesday in March) YOU MUST SELECT PARTY:                    | <input type="checkbox"/> November General Election |
| <input type="checkbox"/> Democratic Ballot <input type="checkbox"/> Republican Ballot |  |

Please deliver the ballot(s) as indicated below (check one):

- Mail to voter at: \_\_\_\_\_
- Street or PO Box                      Town/City                      State                      Zip Code
- Deliver by two Justices of the Peace (This may only be selected if you are ill or physically disabled.)

\_\_\_\_\_  
Signature of Absentee Voter or Authorized Person

\_\_\_\_\_  
Date

For Clerks	<input type="checkbox"/>	Voted at town clerk's office	Date Request Received: _____
Use Only:	<input type="checkbox"/>	Ballot picked up at town clerk's office	Date Ballot Mailed: _____
			Date Ballot Returned: _____

**FOR Voters serving in the MILITARY (active U.S. or overseas) and OVERSEAS Voters:**

Check one:  Military (Active in U.S. or overseas)       Overseas voter (not military)

Voter's Name: \_\_\_\_\_ (First, Middle, Last Name)

Voter's VT Town of Residence (before joining military or moving overseas): \_\_\_\_\_

I request early absentee voter ballot(s) for the election(s) checked below:

- |  |  |
|--|--|
| <input type="checkbox"/> Annual Town Meeting   | <input type="checkbox"/> August Primary Election   |
| Presidential Primary (1st Tuesday in March) YOU MUST SELECT PARTY:   | <input type="checkbox"/> November General Election |
| <u>(select Pres. Primary in Presidential Election years)</u> <input type="checkbox"/> Democratic Ballot <input type="checkbox"/> Republican Ballot |  |

Please deliver the ballot(s) and all election materials as indicated below (check one):

- E-mail Address: \_\_\_\_\_ (Blank ballot will be delivered by e-mail to the voter. All voted ballots must be mailed or sent by a delivery service to the town clerk.)
- Fax to fax number: \_\_\_\_\_ (You must provide country codes and all other codes or numbers necessary to fax successfully to the number provided from a VT telephone.)
- Regular mail delivery to: (Print exactly as necessary to complete delivery to you.)

\_\_\_\_\_  
Signature of Absentee Voter or Authorized Person

\_\_\_\_\_  
Date

IF YOUR INFORMATION for the delivery method selected above CHANGES during the year, you must notify your town clerk of your new contact or delivery information in order to receive your ballots.

**IF YOU ARE REQUESTING A BALLOT FOR SOMEONE OTHER THAN YOURSELF**, you must complete the information below: (family member, health care provider, or person authorized by the absentee voter):

Name of Requestor: \_\_\_\_\_ Date: \_\_\_\_\_

Address of Requestor: \_\_\_\_\_

Street                      Town/City                      State                      Zip Code

Relationship to Voter (check one):  Family member       Health care provider       Person authorized by voter

Civilians Living in the U.S.

Military and Overseas Voters

Please Note: