Massachusetts Official

In-Person Absentee Ballot Application



See reverse side for instructions

Voter Information		Name: Legal Voting Residence:
	1	
		Date of Birth: Telephone Number: E-mail Address:
Ballot Information	2	Date of Election: Type of Election: State Election State Primary Presidential Primary Local Election Local Preliminary
Special Circumstances (If applicable)	3	Party (only if requesting primary ballot): Voter is a member of military on active duty or dependent family member of active duty personnel. Voter is a Massachusetts citizen residing overseas. Voter required assistance in completing application due to physical disability. Assisting person's name: Assisting person's address:
Signed (under pena	alty of	perjury):Date:
		FOR REGISTRAR USE ONLY
We certify that the address listed or	the a	er for whom this application is being made appears to be eligible to vote from the application.

Eligibility

This application is for use by...

A registered voter who will be unable to vote at the polls on Election Day due to absence from the voter's city or town during polling hours, disability, or religious beliefs.

OR

A non-registered voter who is:

- · A Massachusetts citizen who resides overseas; or
- An active member of the armed forces or merchant marines, their spouse or dependent.

Completing the Application

- 1. Voter Information Provide your name, legal voting address, and date of birth. Telephone number and e-mail address are optional fields
- 2. Ballot Information Check a box indicating the type of election for which you are requesting a ballot. For primaries, if you are not enrolled in a party, provide the party whose ballot you are requesting.
- 3. Special Circumstances Check any of the listed circumstances which apply to this application, if any.
- 4. Sign your name. If you require assistance in signing the application, you may authorize someone to sign your name in your presence. That person must complete the assisting person's information in Section 3.