J.	Town/City of Application for Town/City Election Absentee Ballot-RSA 657:4 Absence, Religious Observance. or Disability (Uniformed and Overseas Citizen Voters Residing Outside the U.S. use the federal post card application)
For Official Use Only Voter Not registered	 I hereby declare that (check one): I am a duly qualified voter who is currently registered to vote in this town/ward. I am absent from the town/city where I am domiciled and will be until after the next election, or I am unable to register in person due to a disability, and request that the forms necessary for absentee voter registration be sent to me with the absentee ballot.
red: Voter ID #	 I. I will be entitled to vote by absentee ballot because (check one): I plan to be absent on the day of the election from the city, town, or unincorporated place where I am domiciled. I am confined in a penal institution for a misdemeanor or while awaiting trial. I cannot appear in public on election day because of observance of a religious commitment. I am unable to vote in person due to a disability. I cannot appear at any time during polling hours at my polling place because of an employment obligation. For the purposes of this application, the term "employment" shall include the care of children and infirm adults, with or without compensation.
Date Mailed: Date Returned: ////	 For use only on the Monday immediately prior to the election: I cannot appear at my polling place on election day because the National Weather Service has issued a winter storm warning, blizzard warning, or ice storm warning for election day applicable to my city, town, or unincorporated place and either (check one): I am elderly or infirm or I have a physical disability, and would otherwise vote in person but I have concerns for my safety traveling in the storm. I anticipate that school, child care, or adult care will be canceled, and would otherwise vote in person but will need to care for children or infirm adults.
quested:	Any person who votes or attempts to vote using an absentee ballot who is not entitled to vote by absentee ballot shall be guilty of a misdemeanor. RSA 657:24
Date Requested	III. I am requesting an official absentee ballot for the following election (check <u>only</u> one):
	□ Town/City Election to be held on://
Last Name: First Name:	Turn Over – You Must Complete the back side
	Page 1 of 2

Last Name	First Name	Middle Name	e (Jr.,	Sr., II,II
Applicant's Voting I	Domicile (home) Address:			
Street Number	Street Name Apt/Unit	City/Town	Ward	Zip Co
Mail the ballot to me	e at this address (if different th	an the above home	e address)	
Street or PO Box #	Street name Apt/Unit	City/Town	State	Zip Co
Applicant's Phone N (Cell phone or numb	Sumber: () er where you can be contacted	prior to and on elec	ction day is	preferre
Applicant's Email A	ddress:	@		
		Data Ciana	4.	
The applicant must and assists a voter w	re:	sentee ballot. <u>Any</u> is form shall print	person wh	o witnes
The applicant must <u>and assists a voter w</u> <u>name in the space p</u>	sign this form to receive an ab with a disability in executing th	sentee ballot. <u>Any</u> is form shall print o n.	person wh and sign h	<u>o witnes</u> is or hei
<i>The applicant must</i> and assists a voter w name in the space p I attest that I assisted	sign this form to receive an ab with a disability in executing th rovided on the application form	sentee ballot. <u>Any</u> <u>is form shall print of a shall be a shall </u>	<i>person wh</i> and sign h ne has a dis	<i>o witnes</i> <i>is or her</i> ability.
The applicant must and assists a voter we name in the space point I attest that I assisted Signature Mail/fax/email or he Allenstown Town Cle For clerk addresses Visit the web site: htt receipt of your applied ate the clerk received absentee ballot was a	<i>sign this form to receive an ab</i> <i>with a disability in executing th</i> <i>rovided on the application form</i> I the applicant in executing this	sentee ballot. <u>Any</u> is form shall print of <u>n.</u> form because he/sh <u>rm to your local C</u> NH 03275 jtate@ .sos.nh.gov our absentee ballot. ur absentee ballot w lot, and after the ele Contact your clerk i	<i>person wh</i> <i>and sign h</i> ne has a dis <i>ity/Town (</i> allenstown You may was mailed ection learn if you have	<u>o witnes</u> is or her ability. ability. Clerk. anh.gov verify to you, t if your question
The applicant must and assists a voter we name in the space point I attest that I assisted Signature Mail/fax/email or he Allenstown Town Cle For clerk addresses Visit the web site: htt receipt of your applied ate the clerk received absentee ballot was a	sign this form to receive an above the adisability in executing the rovided on the application form. If the applicant in executing this Print Name Print Name Print Name erk 16 School St., Allenstown, a and fax numbers: https://app.sos.nh.gov to track you cation, obtain the date when yo es your completed absentee ball rejected/not counted and why. It ation on the "Voter Information"	sentee ballot. <u>Any</u> is form shall print of <u>n.</u> form because he/sh <u>rm to your local C</u> NH 03275 jtate@ .sos.nh.gov our absentee ballot. ur absentee ballot w lot, and after the ele Contact your clerk i	<i>person wh</i> <i>and sign h</i> ne has a dis <i>ity/Town (</i> allenstown You may was mailed ection learn if you have	<u>o witnes</u> is or her ability. ability. <u>Clerk.</u> nnh.gov verify to you, f if your questio