## **APPLICATION FOR ABSENTEE BALLOT**

Annual Budget Vote and School Board Election - May 20, 2025

The District Clerk is located at 119 South Avenue, Webster, NY. Feel free to telephone Heather Murphy in advance with any questions at 585-216-0001.

l,	, residing at (fill in street and number, if any, or town
	delivery route, if any)certify that I am, or
Distrio have,	re, on the day of the school district election a qualified voter of the Webster Central School ct. I am, or will be, on such date, over eighteen years of age, a citizen of the United States and or will have, resided in the district for thirty days preceding the date of the vote; I will be unable pear to vote in person on the day of the school district vote for one of the following reasons:
Checl	k and complete one of the following subdivisions:
A.	I will be a patient in a hospital; or
	I will be unable to appear personally at the polling location on that date because of illness or physical disability.
B.	My duties, occupation, business, or studies will require me to be outside the county or city of my residence on such date.  Briefly describe duties, occupation, business or studies:
	OR
	My duties, occupation, or business do not ordinarily require my absence from the county or city of my residence; however, the special circumstances that require my absence on such date are as follows:

**OVER** 

C.	I will be on vacation outside my county or city of residence from to during which time I will be at the following place(s):	
	Name of Employer (if any):	
	I am self-employed.	
	I am retired.	
D.	I will be detained in jail:1. awaiting action by a Grand Jury2. awaiting trial3. after conviction for an offense other than a felony.	
E.	On the date of the vote, I am or will be accompanying or with who is my: 1. spouse2. parent	
	3. child and who is, or would be if he/she were a qualified voter, entitled to apply for the right to vote by absentee ballot, for one of the reasons listed above.	
	Specify reason and provide details:	
unde	eby declare that the foregoing is a true statement to the best of my knowledge and belief, and less that if I make any material false statement in the foregoing statement of application for an intee ballots, I shall be guilty of a misdemeanor.	
Sign	ature of Voter Date	
if the	E: This application must be RECEIVED by the District Clerk at least seven days before the vote ballot is to be mailed to the voter, or the day before the vote if the ballot is to be picked up onally by the voter. Please mail to: District Clerk, Webster Central School District, 119 South true, Webster, NY 14580.	
indic	u wish to have the ballot mailed to an address other than your legal voting address, please ate below: d ballot to:	