

TOWN OF MILTON - Affidavit for Absentee Ballot - Municipal Election

Complete Column "1" and then complete Section "A" or "B" as appropriate.

Column "1"

PLEASE PRINT LEGIBLY

Full Name:

Address which establishes eligibility to vote:

Date of Birth: _____

Telephone
Number: _____

Email
Address: _____

Address to which ballot is to be mailed if it is
different than the Delaware address written above:

I request a ballot for the following elections:

BELOW IS FOR OFFICE USE ONLY

Style: Mail in Person

ID: _____

Date Affidavit Returned:

Voucher Number:

Date Ballot Mailed:

Section "A"

THIS SECTION DOES NOT
HAVE TO BE NOTARIZED.

Complete this section if you are temporarily or
permanently physically disabled or if you
cannot go to your polling place because of one
of the other reasons listed below.

I do solemnly swear or affirm, under penalty of
perjury, that I am unable to go to my regular polling
place during the forthcoming election(s) for the
reason checked below and that the information
contained herein is true.

Check the appropriate box below:

I am sick, or temporarily or permanently
physically disabled.

I am in public service of the U.S. or the State of
Delaware.

Signature of
voter: _____

My expected location on election day is:

Telephone number at my expected location on
Election

Day: _____

Date: _____

Section "B"

THIS SECTION MUST BE NOTARIZED.

Complete this section if you cannot go to your
polling place for one of the reasons listed below.

I do solemnly swear or affirm, under penalty of
perjury, that I am unable to go to my regular polling
place during the forthcoming election(s) for the reason
checked below and that the information contained
herein is true.

Check the appropriate box below:

Due to the nature of my business or occupation
(this includes students and providing dependent care).

I am incarcerated.

I am absent from the district while on vacation.

Due to the tenets or teachings of my religion.

Signature of
voter: _____

My expected location on Election Day is:

Telephone number at my expected location on
Election

Day: _____

Subscribed and sworn to before me this _____

Day of _____ 20__

NOTARY:
