

# 2026 Application for Absentee Ballot

ED-3 (Rev. 05/2026) (Español en otro lado)

## Instructions

You must complete a separate application for each election, primary, and referendum. If someone assists you in completing this application, they must complete section VI. Return your completed application to your municipal clerk. Please consider providing your telephone number and/or email address so the municipal clerk may contact you if needed to process your application and ballot. If your town clerk has a fax machine, you may fax this application to the clerk, but you must also mail the completed application with your original, wet-ink signature to the clerk, either separately or with your absentee ballot. If your application with your original signature is not received by the close of the polls on the day of the election, primary, or referendum, your absentee ballot will not be counted.

## Section I. - Applicant's Information

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Home Address: \_\_\_\_\_  
(Number, Street, Town)

Zip Code: \_\_\_\_\_ Telephone No.: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

For Municipal Clerk's Use

Ballot Identification Number.

Date Forms Issued

Check ▶	Mailed to Applicant <input type="checkbox"/>	Given to Applicant Personally <input type="checkbox"/>
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Pol. Subdivision      Voting District No.

## Section II. - Delivery of Absentee Ballot

The set of absentee voting forms shall be: (check only one)

- Given to me personally at the town clerk's office (absentee ballots will not be mailed to you.)
- Mailed to me personally at the following address:

Mailing Address: \_\_\_\_\_  
(Use only if the mailing address is different from the address above.)

- Supervised Ballot. (Check this box if you live in an institution where supervised balloting will be conducted.)
- For members of the military, overseas voters, electors with permanent absentee ballot status, or voters with print disability **only**:

E-mailed to me at the following address: \_\_\_\_\_

## Section III. - Purpose of Application

A. This application is for (check one):       Election    Primary    Referendum

B. Date of Election, Primary or Referendum: \_\_\_\_\_

C. For Primary only, specify the political party: \_\_\_\_\_

## Section IV. (This section to be used by Members of the Armed Forces and Electors Temporarily Residing Overseas **only**):

- I am a member of the armed forces or the spouse or dependent living where such member is stationed, who needs additional time to vote by absentee ballot due to military contingencies. I, therefore, request that a blank absentee ballot be issued to me beginning 90 days before the regular election. I understand that if the military contingency ceases to exist, I may apply for an additional ballot with candidates printed on it.
- I am an elector of the above municipality who is (1) temporarily living or expects to be living or traveling outside the territorial limits of the United States before and on election day or (2) a member of the armed forces or the spouse or dependent living where such member is stationed, and request that a blank absentee ballot, together with a complete list of candidates and questions be issued to me (approximately 45 days before an election and 30 days before a primary). If this application reaches the municipal clerk after the time of availability of regular absentee ballots, I understand that I will be sent a regular ballot with candidates printed on it.

## Section V. - Applicant's Declaration

I declare, under the penalties of false statement in absentee balloting, that the above statements are true and correct, and that I am the applicant named above. (Sign your legal name in full. If you are unable to write, you may authorize someone to write your name and the date in the spaces provided, followed by the word "by" and the signature of the authorized person. Such person must also complete Section VI below.)

Signature of Applicant: \_\_\_\_\_ Date Signed: \_\_\_\_\_

## Section VI. - Declaration of person providing assistance (Must be completed by any person who assists with the completion of this application)

I sign this application under penalties of false statement in absentee balloting.

Signature of assistor: \_\_\_\_\_ Printed Name: \_\_\_\_\_ Tel.No: \_\_\_\_\_

Residence Address: \_\_\_\_\_

## Penalties for False Statements

A person is guilty of false statement in absentee balloting when they intentionally make a false written statement in or on or signs the name of another person to the application for an absentee ballot or the return envelope accompanying any such ballot, which they do not believe to be true and which statement or signature is intended to mislead a public servant in the performance of their official function. False statement in absentee balloting is a class D felony, which is punishable by up to five years in prison, up to a \$5,000 fine, or both.