

**WESTCHESTER COUNTY BOARD OF ELECTIONS**  
**25 Quarropas Street, White Plains, NY 10601**  
**(914) 995-5700**  
**Absentee Ballot Application.**

**BOARD USE ONLY:**  
 Town/City/Ward/Dist: \_\_\_\_\_  
 \_\_\_\_\_  
 Registration No: \_\_\_\_\_  
 Party: \_\_\_\_\_  
 Processor: \_\_\_\_\_

This application must either be personally delivered to your county board of elections not later than the day before the election, or postmarked by a governmental postal service not later than 7th day before election day. The ballot itself must either be personally delivered to the board of elections no later than the close of polls on election day, or postmarked by a governmental postal service not later than the day before the election and received no later than the 7th day after the election.

**1. I am requesting, in good faith, an absentee ballot due to (check one reason):**

<input type="checkbox"/> absence from county or New York City on election day	<input type="checkbox"/> patient or inmate in a Veterans' Administration Hospital
<input type="checkbox"/> temporary illness or physical disability	<input type="checkbox"/> detention in jail/prison, awaiting trial, awaiting action by a grand jury, or in prison for a conviction of a crime or offense which was not a felony
<input type="checkbox"/> permanent illness or physical disability	
<input type="checkbox"/> duties related to primary care of one or more individuals who are ill or physically disabled	

**2. absentee ballot(s) requested for the following election(s) :**  
 Primary Election only     General Election only     March Village Election     Special Election only  
 Any election held between these dates: absence begins: \_\_\_/\_\_\_/\_\_\_ absence ends: \_\_\_/\_\_\_/\_\_\_

**3.** last name or surname \_\_\_\_\_ first name \_\_\_\_\_ middle initial \_\_\_\_\_ suffix \_\_\_\_\_

**4.** date of birth \_\_\_/\_\_\_/\_\_\_ county where you live \_\_\_\_\_ phone number (optional) \_\_\_\_\_ email (optional) \_\_\_\_\_

**5.** address where you live (residence) street \_\_\_\_\_ apt \_\_\_\_\_ city \_\_\_\_\_ state **NY** zip code \_\_\_\_\_

**6. Delivery of Primary Election Ballot (check one)**     Deliver to me in person at the board of elections

I authorize (give name): \_\_\_\_\_ to pick up my ballot at the board of elections.  
 Mail ballot to me at: (mailing address) \_\_\_\_\_  
 street no. \_\_\_\_\_ street name \_\_\_\_\_ apt. \_\_\_\_\_ city \_\_\_\_\_ state \_\_\_\_\_ zip code \_\_\_\_\_

**7. Delivery of General (or Special) Election Ballot (check one)**     Deliver to me in person at the board of elections

I authorize (give name): \_\_\_\_\_ to pick up my ballot at the board of elections.  
 Mail ballot to me at: (mailing address) \_\_\_\_\_  
 street no. \_\_\_\_\_ street name \_\_\_\_\_ apt. \_\_\_\_\_ city \_\_\_\_\_ state \_\_\_\_\_ zip code \_\_\_\_\_

**Applicant Must Sign Below**

**8.** I certify that I am a qualified and a registered (and for primary, enrolled) voter; and that the information in this application is true and correct and that this application will be accepted for all purposes as the equivalent of an affidavit and, if it contains a material false statement, shall subject me to the same penalties as if I had been duly sworn.

**Sign Here:**   X   **Date** \_\_\_/\_\_\_/\_\_\_

If applicant is unable to sign because of illness, physical disability or inability to read, the following statement must be executed: By my mark, duly witnessed hereunder, I hereby state that I am unable to sign my application for an absentee ballot without assistance because I am unable to write by reason of my illness or physical disability or because I am unable to read. I have made, or have the assistance in making, my mark in lieu of my signature. (No power of attorney or preprinted name stamps allowed. See detailed instructions.)

Date \_\_\_/\_\_\_/\_\_\_ Name of Voter: \_\_\_\_\_ Mark: \_\_\_\_\_

I, the undersigned, hereby certify that the above named voter affixed his or her mark to this application in my presence and I know him or her to be the person who affixed his or her mark to said application and understand that this statement will be accepted for all purposes as the equivalent of an affidavit and if it contains a material false statement, shall subject me to the same penalties as if I had been duly sworn.

\_\_\_\_\_  
 (address of witness to mark)

\_\_\_\_\_  
 (signature of witness to mark)

# June 23<sup>rd</sup> Primary Absentee Ballot Instructions

To vote by mail you must complete an absentee ballot application and mail that application to the Westchester County Board of Elections as soon as possible. If you do not already have a printed Absentee Ballot Application, forms can be downloaded from my campaign website at: [steveotisasassembly.com](http://steveotisasassembly.com)

Each voter must submit a separate absentee ballot application.

## Instructions for the Absentee Ballot Application

- 1. Check the box for “Temporary illness or physical disability” as provided in the Governor’s order.**
- 2. Check Primary Election only.**
- 3-5. Fill in your information.**
- 6. Delivery of your primary ballot.** Indicate how you would like your ballot delivered to you.
- 7. You can skip question seven.**
- 8. Signature and date.** Under the executive order applications for absentee ballots may be made by mail, email, fax or in person.

You can mail your absentee application(s) to:  
**Westchester County Board of Elections  
25 Quarropas Street  
White Plains, NY 10601**

You can e-mail your absentee application(s) to the Board of Elections at:  
**[boe-westabsentee@westchestergov.com](mailto:boe-westabsentee@westchestergov.com)**

If you have any further questions regarding absentee ballot voting, please call the Board of Elections at 995-5700.

### **Deadlines:**

**You should apply as early as possible.**

As of this writing the last day to postmark application for primary ballot is June 16th. The last day to apply in person for primary ballot is June 22nd. Please check the Board of Elections website for any changes to the process made by the Governor at:

**[citizenparticipation.westchestergov.com](http://citizenparticipation.westchestergov.com)**