CHEEKTOWAGA CENTRAL SCHOOL DISTRICT

MILITARY ABSENTEE BALLOT APPLICATION FOR ANNUAL DISTRICT MEETING

THIS FORM IS FOR ABSENT UNIFORMED SERVICE MEMBERS AND THEIR FAMILIES RESIDING OUTSIDE THE UNITED STATES. IT IS USED TO REQUEST A MILITARY ABSENTEE BALLOT.

For a military voter to be issued a military ballot, the <u>District Clerk must receive a valid ballot</u> application no later than 5:00 pm on April 21, 2025.

Last Name:				First Name:				
Select One I am on active duty in the Uniformed Services or Merchant Marine – OR - I am an eligible spouse or dependent.								
I am a U.S. citizen living outside the country, and I intend to return.								
I am a U.S. citizen living outside the country, and my intent to return is uncertain.								
I am a U.S. citizen living outside the country, and I have never lived in the United States.								
➤ What is your address in the U.S. requesting an absentee ballot?								
Charat Address			Church Ada					
Street Address			Street Add	iress				
City	State	Zip Code	City			State	Zip Code	
➤ Where are you now? You MUST Your mailing address. (Different from all	address to receive your voting materials. Your mail forwarding address. (If different from mailing address							
Street Address			Street Add	dress				
City	State	Zip Code	City			State	Zip Code	
➤ What is your contact information? This is so election officials can reach you about your request. Provide the country code and area code with your phone and fax number. Do not use a Defense Switched Network (DSN) number.								
Email:				Phone:				
Alternate email:				Fax:				
➤ How do you want to receive voting materials:			MAIL					
			EMAIL					
			FAX					

Additional information (if needed)						
➤ You must read and sign this statement.						
I HEREBY DECLARE THAT THE FOREGOING IS A TRUE STATEMENT TO THE BEST OF MY KNOWLEDGE AND BELIEF, AND I UNDERSTAND THAT IF I HAVE MADE ANY MATERIAL FALSE STATEMENTS IN THE FOREGOING STATEMENT OF APPLICATION FOR ABSENTEE BALLOT, I SHALL						
BE GUILTY OF A MISDEMEANOR.						
Date		Signature or Applicant				
Datum to	Charletowara Cantual Ca	h a al Diatrica				
Return to:	Return to: Cheektowaga Central School District Attn: District Clerk					
	3600 Union Road Cheektowaga, NY 14225					
	OR jhedges@ccsd-k12.net					
OFFICE USE ONLY						
Board Clerk Approval or Designee Date						
Ballot:MailedFaxed - No:						
	ea – No: ailed					

Completed Ballot Received Back in District Date ______

Recorded on Absentee Voter List

Date - _____

Date Processed in Person_____