# 2020 Municipal Election
# Early Ballot Application

William Francis Galvin
Secretary of the Commonwealth

**Voter Information** **1**

Name: _____

Legal Voting Residence:

_____

_____

Date of Birth: _____ Telephone Number: _____

E-mail Address: _____

**Ballot Information** **2**

Mail Ballot to: _____

_____

**Special Circumstances** *(If applicable)* **3**

☐ Voter required assistance in completing application due to physical disability.

Assisting person's name: _____

Assisting person's address: _____

Signed (under penalty of perjury): _____ Date: _____

## Eligibility

Any registered voter may use this application to request an absentee ballot for a local election being held on or before June 30, 2020.

## Completing the Application

1. Voter Information – Provide your name, legal voting address, and date of birth. Telephone number and e-mail address are optional fields.
2. Ballot Information – Provide the address where you want the ballot mailed.
3. Special Circumstances – If you are assisting a voter in completing this application, complete this section.
4. Sign your name. If you require assistance in signing the application, you may authorize someone to sign your name in your presence. That person must complete the assisting person's information in Section 3.

## Submitting the Application

Send the completed application to the local election official at your city or town hall.

Applications can be mailed or hand-delivered. Applications may also be submitted electronically by fax or e-mail, as long as your signature is visible.

Please allow ample mailing time for this application and for the ballot. Ballots must be returned to your local election official by Election Day.

Find contact information for local election officials at www.sec.state.ma.us/ele or by calling 1-800-462-VOTE (8683).