

1500 Dayspring Ridge
Walworth NY 14568
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Shawn Van Scoy, Ed.D.
Superintendent of Schools
Robin Vogt
Board of Education President

April 22, 2019

Dear Voter:

In order to receive an absentee ballot for the Gananda Central School District Budget Vote & Board of Education Election on May 21, 2019 you must submit an application for an absentee ballot. If you meet the criteria and want to participate in the vote, please fill out the application and send it to the attention of Leslie Ferrante, District Clerk, Gananda CSD, 1500 Dayspring Ridge, Walworth, NY 14568. Upon receipt and approval of the application, an absentee ballot will be mailed to you. Ballots will be available for mailing on April 25, 2019.

This application **must** be received by the District Clerk at least seven (7) days before the vote if the ballot is to be mailed to the voter, or the day before the vote if the ballot is to be picked up personally by the voter.

If you have any questions, please feel free to contact Leslie Ferrante, District Clerk, at 986-0610.

*District Clerk
Gananda Central School District, 1500 Dayspring Ridge, Walworth, NY 14568
State of New York
County of Wayne*

APPLICATION FOR ABSENTEE BALLOT

Date of Vote: May 21, 2019

Name: _____

Street Address: _____

Town: _____ Zip Code: _____

The undersigned applicant certifies as follows:
That I reside at the above specified address; I am or will be, on the day of the school district vote specified above, a qualified voter of the Gananda Central School District. I am or will be, on such date, over 18 years of age, a citizen of the United State and have or will have resided in the district for thirty (30) days preceding the date of such vote.

I will be unable to appear to vote in person on the day of the school district vote for which the absentee ballot is requested for one of the following reasons:

Check (A), (B), (C), (D), or (E) and complete where applicable.

(A) because I will

(1) be a patient in a hospital; or

(2) be unable to appear personally at the polling place on such day because of illness or physical disability. Briefly describe such illness or disability and list the name of applicant's attending physician, if any.

(B) because my duties, occupation, business or studies will require me to be outside the county of my residence on such day.

My duties, occupation or studies (list school address) are as follows:

Or

If my duties, occupation, business, or studies are not such a nature as ordinarily to require my absence from the county of my residence, the special circumstances on account of which such absence is required are as follows:

Employer, if any: _____

Employer address: _____

Self-employed: (YES) (NO)

(C) because I will be on vacation outside my county of residence on such day from _____ to _____

WHERE on vacation: _____

- (D) because I am
- (1) being detained in jail awaiting action by a grand jury or awaiting trial:
 - (2) being confined in prison after conviction for an offense other than a felony.
- (E) because I am a qualified voter who is a
- (1) spouse
 - (2) child
 - (3) parent

of _____ who is a qualified voter and who is entitled to, and has applied for, the right to vote by an absentee ballot vote and I will be accompanying that qualified voter on the date of the school district vote.

I HEREBY DECLARE THAT THE FOREGOING IS A TRUE STATEMENT TO THE BEST OF MY KNOWLEDGE AND BELIEF, AND I UNDERSTAND THAT IF I MAKE ANY MATERIAL/FALSE STATEMENT IN THE FOREGOING STATEMENT OF APPLICATION FOR ABSENTEE BALLOT, I SHALL BE GUILTY OF A MISDEMEANOR.

Date

Signature of Voter (Applicant)

Phone

MUST BE RECEIVED BY THE DISTRICT CLERK AT LEAST SEVEN (7) DAYS BEFORE THE VOTE IF THE BALLOTS IS TO BE MAILED TO THE VOTER, OR THE DAY BEFORE THE VOTE, IF THE BALLOT IS TO BE PICKED UP PERSONALLY BY THE VOTER.