

EARLY VOTING BALLOT APPLICATION

CUBA-RUSHFORD CENTRAL SCHOOL DISTRICT
5476 Route 305 N
Cuba, NY 14727

ALL APPLICANTS MUST COMPLETE THE FOLLOWING

I am requesting an early voting ballot for the May 21, 2024, District Vote.

Applicant's Name _____ / /
LAST FIRST INITIAL DATE OF BIRTH

Street Number & Address _____

City/Town/Village _____
ZIP CODE

MAIL BALLOT TO THIS ADDRESS: Name _____
 (please print) Street Number & Address _____

 City/Town/Village State Zip Code

I certify that I am a qualified and registered voter of the Cuba-Rushford Central School District and that I am or will be, on the date of the school district election or vote, over 18 years of age, a citizen of the United States and have or will have resided in the Cuba-Rushford Central School District for **30 days** preceding such date.

APPLICANT MUST SIGN BELOW

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 materially false statement in the foregoing statement of application for early mail ballot, I shall be guilty of a misdemeanor.

_____ 2024
(date)

(signature of voter)

Applications must be signed and received by the District Clerk or designee **NOT LATER THAN 5:00PM** seven (7) days before the district vote and/or election if the ballot is to be mailed or one (1) day before the district vote and/or election if the ballot is to be personally delivered.

If returning the application by mail address it to:

**District Clerk
Cuba-Rushford Central School District
5476 Route 305
Cuba, NY 14727**

FOR OFFICE USE ONLY: (District Clerk fills out this box)

Application received	Ballot (taken) received
Ballot sent	