

TOWN OF LISBON
APPLICATION FOR AN ABSENTEE BALLOT
MARCH TOWN ELECTION

TO THE TOWN CLERK OF LISBON:

I, _____ (Please print name as it appears on the Town voter checklist) do hereby apply for an official absentee voting ballot. I am a duly qualified voter, and am entitled to vote in the Town of Lisbon.

LOCAL VOTING ADDRESS (Lisbon)

Street & Number _____

Town _____ State: _____ Zip Code: _____

ADDRESS TO MAIL ABSENTEE BALLOT TO:

Street & Number _____

Town _____ State _____ Zip Code _____

Date: _____ Signature: _____

OFFICE USE ONLY

Date Received: _____ Date Mailed: _____

Date Returned: _____

PLEASE MAIL TO: **Jennifer Trelfa, Town Clerk**

 46 School Street

 Lisbon, NH 03585