

# 2022 Absentee and Vote by Mail Application



William Francis Galvin  
Secretary of the Commonwealth

## Voter Information

1

Name: \_\_\_\_\_

Address of Voter Registration: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

2

Mail my **Ballot** to me at

\_\_\_\_\_  
\_\_\_\_\_

Check All that apply;

All Elections \_\_\_\_\_ Annual Town Election \_\_\_\_\_

September State Primary \_\_\_\_\_ Party \_\_\_\_\_ November State Election \_\_\_\_\_

## Assistance (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 a mail-in ballot.

## Completing the Application

1. Voter Information – Provide your name, the address where you are registered to vote, and date of birth. Telephone number and e-mail address are optional.
2. Ballot Information – Provide the address where you want your ballot mailed.
3. Assistance – 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 Town Clerk, 472 Main St., Acton, MA 01720  
or email to [clerk@actonma.gov](mailto:clerk@actonma.gov) or drop off at the Drop Box found at the entrance to Town Hall.  
Questions, call 978-929-6620 or email [clerk@actonma.gov](mailto:clerk@actonma.gov)