

Instructions For Completing the Attached Mail Ballot Application

The attached application is to be completed if you wish to vote by mail ballot in the

ELECTION - **November 3, 2009**

Your application must be received at the local board of canvassers in the city or town where you are registered to vote by **4:00 p.m. on October 13, 2009**. If you have any questions on how to fill out the attached application, contact your local board of canvassers. Addresses and phone numbers for local boards of canvassers are located on the back of these instructions.

 To Complete the Attached Application:

BOX A

- All information must be provided for 'Box A'. Be sure to print or type.

BOX B (May be completed when checking category 1, 2, 5, 6, or 7 in 'Box C'.)

- If you check #1 or #7 in 'Box C', provide an address in 'Box B'. Otherwise your ballot will be sent to the local board of canvassers where you are registered to vote.

When completing 'Box B', be sure to clearly print the entire mailing address needed for you to receive mail at that location.

If your ballot is being mailed to you outside the continental U.S., you are also entitled to have your ballot faxed to you. If you want your ballot faxed and mailed to you, please provide the appropriate fax number in 'Box B'.

- If you check #2 in 'Box C', provide an address in 'Box B'. Otherwise your ballot will be mailed to you at your voting address listed in 'Box A'.

When completing 'Box B', be sure to clearly print the entire mailing address needed for you to receive mail at your school.

- If you check #5 or #6 in 'Box C', you must complete 'Box B' in order to receive a mail ballot.

BOX C

- Indicate the category under which you qualify in 'Box C' by making a mark in the () next to that category.
- Be sure to read all of the information in the category that you check. Provide any additional information in 'Box B' if required.

BOX D

- You must sign your name in full where indicated in this box.
- The application must be notarized, or witnessed by two persons. However, if you have checked off category #7, no witnesses or notary are necessary.

 To Return Your Completed Application:

You may separate these instructions from the mail ballot application and you may keep them.

Return your completed application to your local board of canvassers. **Addresses and phone numbers for local boards of canvassers are located on the back of these instructions.**

 To Cast Your Ballot:

If you require assistance in the casting of your vote, contact your local board of canvassers when you receive your ballot. By law, you are entitled to assistance by a bi-partisan pair of supervisors.

NOTICE TO APPLICANT!!!

IF ANYONE ATTEMPTS TO INTIMIDATE OR UNDULY INFLUENCE YOU, OR INTERFERE WITH YOUR RIGHT TO VOTE, CONTACT YOUR LOCAL BOARD OF CANVASSERS.

This application is a matter of public record - But your vote is confidential.

"Any person knowingly and willfully making a false application or certification or knowingly and willfully aiding and abetting in the making of a false application or certification shall be guilty of a felony and shall be subject to the penalties provided for in section 17-26-1." [RIGL, 17-20-2(d)]

State of Rhode Island and Providence Plantations

Application of Voter for Ballot for ELECTION on NOVEMBER 3, 2009

COMPLETE HIGHLIGHTED SECTIONS - See Attached Instructions

NOTE: This application must be received by the board of canvassers in your city or town not later than 4:00 p.m. on **October 13, 2009**.

For Official Use Only
Precinct: _____
Date: _____
Accepted by: _____

BOX A:	(PRINT OR TYPE)
Name of Voter _____	
Voting Address _____	
City/Town _____ RI _____	Zip Code _____
Date of Birth _____	Phone Number _____

BOX B:	(PRINT OR TYPE)
Name of Institution (if applicable) _____	
Address _____	
Address _____	
City/Town _____	State _____ Zip Code _____
Fax Number (if applicable for Box C, category 1 or 7) _____	

BOX C:

I certify that I am eligible for a mail ballot on the following basis: (CHECK ONE ONLY)

1. I will be **absent from the state** on the day of the election during the entire period of time when the polls are to be open. Provide an out-of-state mailing address in BOX B above or the ballot will be mailed to the local board of canvassers.

2. I will be absent from the city or town of my voting residence during the entire period of time when the polls are to be open because of my status as a **student**, or **spouse of a student**, at an **institution of higher learning within the state of Rhode Island**. Complete BOX B above with your entire address or the ballot will be mailed to address in BOX A. Indicate name of institution: _____

3. I am **incapacitated** to such an extent that it would be an undue hardship to vote at the polls because of **illness, mental or physical disability, blindness** or a **serious impairment of mobility**. Ballot will be mailed to address in BOX A.

4. I belong to a **religion** whose tenets forbid secular activity including voting on the day of election. Ballot will be mailed to address in BOX A.

5. I am confined in a **hospital, convalescent home, nursing home, rest home**, or similar institution. Complete BOX B above.

6. I am detained while **awaiting trial** or **imprisoned** for a cause other than final conviction of a felony. Complete BOX B above.

7. I am employed or in service intimately connected with **military** operations or because I am a spouse or dependent of such person. Complete BOX B above or the ballot will be mailed to the local board of canvassers.

8. I am employed by the (a) state board of elections, (b) elections division of the secretary of state, (c) a member of the staff of a local canvassing authority, or (d) a poll worker assigned to work election day outside of their voting district.

BOX D:

I declare that all of the information I have provided on this form is true and correct to the best of my knowledge. I further state that I am not a qualified voter of any other city or town or state and have not claimed and do not intend to claim the right to vote in any other city or town or state.

If unable to sign name because of physical incapacity _____ or otherwise, applicant shall make his or her mark "X". **Signature in Full**

This application must either be sworn to before a notary public OR before two (2) witnesses who must sign their names and affix their addresses. No witnesses or notary are necessary if checking category #7.

2 WITNESSES:

1 _____
Sign Name _____
Street, City/Town, State _____

2 _____
Sign Name _____
Street, City/Town, State _____

OR

NOTARY:
Sworn to (or affirmed) before me, this ____ day of _____, 20____.

Notary Public
My Commission Expires: _____

(If executed outside of R.I. by a Notary Public, attest in manner authorized by law of place where taken.)

Addresses and Phone Numbers of Local Boards of Canvassers

Barrington Town Hall, 283 County Rd. 02806	247-1900
Bristol Town Hall, 10 Court St. 02809	253-7000
Burrillville Town Hall, 105 Harrisville Main St., Harrisville 02830	568-4300
Central Falls City Hall, 580 Broad St. 02863	727-7450
Charlestown Town Hall, 4540 South County Trl. 02813	364-1200
Coventry Town Hall, 1670 Flat River Rd. 02816	822-9150
Cranston City Hall, 869 Park Ave. 02910	461-1000
Cumberland Town Hall, 45 Broad St. 02864	728-2400
East Greenwich Town Hall, 125 Main St., P.O. Box 111 02818	886-8603
East Providence City Hall, 145 Taunton Ave. 02914	435-7502
Exeter Town Hall, 675 Ten Rod Rd. 02822	294-2287
Foster Town Hall, 181 Howard Hill Rd. 02825	392-9200
Glocester Town Hall, 1145 Putnam Pike 02814	568-6206
Hopkinton Town Hall, 1 Town House Rd. 02833	377-7777
Jamestown Town Hall, 93 Narragansett Ave. 02835	423-7200
Johnston Town Hall, 1385 Hartford Ave. 02919	553-8856
Lincoln Town Hall, 100 Old River Rd., P.O. Box 100 02865	333-1140
Little Compton Town Hall, 40 Commons, P.O. Box 226 02837	635-4400
Middletown Town Hall, 350 East Main Rd. 02842	849-5540
Narragansett Town Hall, 25 Fifth Ave. 02882	782-0625
Newport City Hall, 43 Broadway 02840	845-5386
New Shoreham Town Hall, Old Town Rd., P.O. Box 220 02807	466-3200
North Kingstown Town Hall, 80 Boston Neck Rd. 02852	294-3331
North Providence Town Hall, 2000 Smith St. 02911	232-0900
North Smithfield Municipal Annex, 575 Smithfield Rd. 02896	767-2200
Pawtucket City Hall, 137 Roosevelt Ave. 02860	728-0500
Portsmouth Town Hall, 2200 East Main Rd. 02871	683-3157
Providence City Hall, 25 Dorrance St. 02903	421-0495
Richmond Town Hall, 5 Richmond Townhouse Rd., Wyoming 02898	539-9000x9
Scituate Town Hall, 195 Danielson Pike, North Scituate 02857	647-7466
Smithfield Town Hall, 64 Farnum Pike, Esmond 02917	233-1000
South Kingstown Town Hall, 180 High St., Wakefield 02879	789-9331
Tiverton Town Hall, 343 Highland Rd. 02878	625-6703
Warren Town Hall, 514 Main St. 02885	245-7340
Warwick City Hall, 3275 Post Rd. 02886	738-2000
West Greenwich Town Hall, 280 Victory Hwy. 02817	392-3800
West Warwick Town Hall, 1170 Main St. 02893	822-9201
Westerly Town Hall, 45 Broad St. 02891	348-2503
Woonsocket City Hall, 169 Main St. 02895	762-0027
Office of the Secretary of State, Elections & Civics Division 148 W River Street, Providence 02904	222-2340 711 (TDD)
RI State Board of Elections 50 Branch Avenue, Providence 02904	222-2345 711 (TDD)