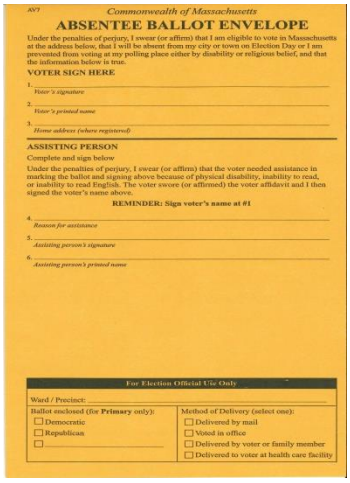
ABSENTEE BALLOT PACKET

Every voter who requests an Absentee Ballot will receive one of following:

1. **Instructions.**
2. **Ballot-If you are registered in a party, you will receive that party ballot, if you are Unenrolled *(formerly known as Independent) you* had to specify on your application what party ballot you wanted to receive otherwise you will not receive one until you contact us with your choice.**
3. **AV7 Envelope- Place cast ballot in this envelope that is marked with the voters name and address and sign on line 3. The ballot will not be accepted without the voter's signature.**
4. **AV8 Envelope-Place signed, sealed, AV7 envelope(containing your cast ballot) inside the pre-addressed , postage paid AV8 Envelope.**

AV7 ENVELOPE



AV7

Commonwealth of Massachusetts

ABSENTEE BALLOT ENVELOPE

Under the penalties of perjury, I swear (or affirm) that I am eligible to vote in Massachusetts at the address below, that I will be absent from my city or town on Election Day or I am prevented from voting at my polling place either by disability or religious belief, and that the information below is true.

VOTER SIGN HERE

1. _____
Voter's signature

2. _____
Voter's printed name

3. _____
Home address (where registered)

ASSISTING PERSON

Complete and sign below

Under the penalties of perjury, I swear (or affirm) that the voter needed assistance in marking the ballot and signing above because of physical disability, inability to read, or inability to read English. The voter swore (or affirmed) the voter affidavit and I then signed the voter's name above.

REMINDER: Sign voter's name at #1

4. _____
Reason for assistance

5. _____
Assisting person's signature

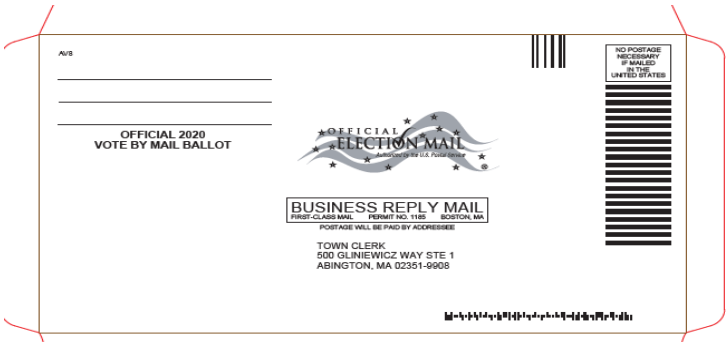
6. _____
Assisting person's printed name

For Election Official Use Only

Ward / Precinct: _____

Ballot enclosed (for **Primary** only):	Method of Delivery (select one):
☐ Democratic	☐ Delivered by mail
☐ Republican	☐ Voted in office
☐ _____	☐ Delivered by voter or family member
	☐ Delivered to voter at health care facility

AV8 ENVELOPE



AV8

_____

_____

_____

OFFICIAL 2020
VOTE BY MAIL BALLOT

OFFICIAL ELECTION MAIL
Authorized by U.S. Postal Service

BUSINESS REPLY MAIL
FIRST-CLASS MAIL PERMIT NO. 1185 BOSTON, MA
POSTAGE WILL BE PAID BY ADDRESSEE

TOWN CLERK
500 GLINIEWICZ WAY STE 1
ABINGTON, MA 02351-9908

NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES