



File #: 2019-82
08/09/2019 02:08 PM
1 Pages

ELECTION FILINGS

Susan M. Pawluk, Town Clerk



RECEIVED FOR RECORD
SUSAN M. PAWLUK
2019 AUG -9 PM 2:08
STRATFORD TOWN CLERK

STRATFORD, CT

ABSENTEE BALLOT APPLICATION DISTRIBUTOR ACKNOWLEDGEMENT FORM

DATE: 8/9/19
NAME OF DISTRIBUTOR: GREG CANN
PLEASE PRINT CLEARLY

I AM REQUESTING, 25 ABSENTEE BALLOT APPLICATIONS.

SERIAL # 604 through SERIAL # 628

- I AM DISTRIBUTING THESE APPLICATIONS FOR THE FOLLOWING PRIMARY: **SEPTEMBER 10, 2019**
- I ACKNOWLEDGE THAT I AM THE SOLE DISTRIBUTOR
- I WILL RETURN THE LOG OF APPLICANTS TO THE TOWN CLERK **AT THE LATEST** ONE DAY PRIOR TO THE ELECTION, **SEPTEMBER 9, 2019 BY 4:00 P.M.**
- I WILL RETURN ALL UNUSED APPLICATIONS **AT THE LATEST** ONE DAY PRIOR TO THE ELECTION. **SEPTEMBER 9, 2019 BY 4:00 P.M.**
- I WILL RETURN COMPLETED APPLICATIONS PROMPTLY TO THE TOWN CLERK.
- I WILL **NOT** HANDLE AN ABSENTEE BALLOT. (READ ALL YOU NEED TO KNOW ABOUT ABSENTEE BALLOTS).

I HAVE RECEIVED THE FOLLOWING INFORMATION FROM THE TOWN CLERK:

- ABSENTEE BALLOT APPLICATION DISTRIBUTOR INFORMATION LETTER.
- ALL YOU NEED TO KNOW ABOUT ABSENTEE BALLOTS AND THE SAMPLE WARNING STATEMENT FOR UNSOLICITED APPLICATIONS.
- DISTRIBUTOR LOG OF APPLICANTS.
- **I UNDERSTAND THAT IF I FAIL TO COMPLY WITH THESE STATUTES, I WILL BE REPORTED TO THE STATE ELECTION ENFORCEMENT COMMISSION.**

SIGNATURE OF SOLE DISTRIBUTOR: [Signature]
ADDRESS OF DISTRIBUTOR: 234 Klondike St
TELEPHONE NUMBER OF DISTRIBUTOR: 203 521 6512
EMAIL ADDRESS OF DISTRIBUTOR: gcann07@yahoo.com

PLEASE MAKE COPIES OF YOUR LOGS OR APPLICATIONS BEFORE FILING
IF REQUESTING COPIES FROM THE TOWN CLERK'S OFFICE THE FEE IS .5

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Susan M. Pawluk
Stratford Town Clerk