



Lewiston-Porter Central School District
Office of the District Clerk
4061 Creek Road, Youngstown, NY 14174
716-286-7266(p), 716-286-7859 (f)
mbarile@lew-port.com
www.lew-port.com

Early Voting Ballot Application

ALL APPLICANTS MUST COMPLETE THIS FORM

I am requesting an early voting ballot for the May 20, 2025, District Vote.

Applicant's Name _____ / ____ / ____
LAST FIRST INITIAL DATE OF BIRTH

Street Number & Address _____

City/Town/Village _____
ZIP CODE

☐ "I am a qualified voter of the Lewiston-Porter Central School District in that I am or will be, on the date of the school district election or vote, over 18 years of age, a citizen of the United States and have or will have resided in the Lewiston-Porter Central School District for **30 days** preceding such date."

I hereby declare that the foregoing is a true statement to the best of my knowledge and belief, and I understand that if I make any materially false statement in the foregoing statement of application for early mail ballot, I shall be guilty of a misdemeanor.

(signature of voter)

(date)

Applications must be signed and received by the District Clerk or designee **NOT LATER THAN 5:00PM** seven (7) days before the district vote and/or election if the ballot is to be mailed or one (1) day before the district vote and/or election if the ballot is to be personally delivered.

Please return this application to: Office of the District Clerk

FOR OFFICE USE ONLY: (District Clerk fills out this box)

Application received	Ballot (taken) received
Ballot sent	Ballot voted in office