

New York State Board of Elections

APPROVED RESOLUTION 25-02

RESOLUTION TO APPROVE REVISED AFFIDAVIT ENVELOPE

WHEREAS, the New York State Board of Elections (hereinafter "the State Board"), is charged with prescribing a form to be used in polling places on election day by voters who find themselves in circumstances articulated in New York State Election Law, Section 8-302(2-b)(c) and/or Section 8-302(3)(e); and

WHEREAS, Chapter 481 of the Laws of 2023 established the New York Early Mail Voter Act; and

WHEREAS, changes to the affidavit envelope are required to reflect the amendments made by Chapter 481; and

WHEREAS, the attached sample reflect the consensus of the State Board staff's review of said form;

NOW THEREFORE BE IT RESOLVED, that the State Board does hereby approve the sample affidavit envelope form as attached herewith and directs staff to distribute said sample immediately to county boards advising them to use said sample forthwith.



A Please provide the following	grequired information	
Your name The address where you live	Last name	Suffix
	First name	Middle Initial
	Address (not P.O. box)	
	Apt. Number Zip code	
	City/Town/Village	
	New York State County	
Date of birth	M,M//D,D//Y,Y,Y,Y Party enrollmer	nt
B Affidavit ballot acknowledge	pectors have informed me that, based on the information	available to them I am required to
vote by affidavit ballot. I further that I am at the correct poll site	acknowledge that I may ask the inspectors to review the e. If I am not, I understand that only votes for contests in v le correct county and at a site designated for my assigned	address provided above to confirm which I am eligible to participate may
before this election, and remain one or more of the following: n required to present identification not voted in this election, but t	red to vote from the address provided above, have lived at a qualified voter. I acknowledge that my reason for voting my record is not available, I have moved within New York S on when I voted today, but I did not do so, a signature is me records of the Board indicate that I have already voted, natee, early mail, special ballot, special federal, UOCAVA, o	g by affidavit ballot is because of tate since my last registration, I was hissing from my voter record, I have or the records of the Board indicate
If applicable: I have moved with	nin New York State since my last registration, and my prev	rious address was:
Additional information to re	gister to vote in the event that you do not have a valid vo	oter registration on file
Qualifications	Are you a citizen of the U.S.?	Yes No
	If you answer <i>No</i> , you cannot register to vote.	
	A) Will you be 18 years of age or older on or before election day?	
	B) Are you at least 16 years of age and understand that you must be 18 years of age on or before election day to vote, and that until you will be eighteen years of age at the time of such election your registration will be marked "pending" and you will be unable to cast a ballot in any election?	
	If you answer No to both of the prior questions, you can	not register to vote.
More information The address where you receive mail Skip if same as above	Telephone (optional)	Gender (optional)
	Email (optional)	
	Address or P.O. Box	
	P.O. Box Zip code	
	City/Town/Village	
Voting history	Have you voted before? Yes No	What year?
Voting information that has changed Skip if this has not changed or you have not voted before	Your name was	
	Your address was	
Identification You must make 1 selection	Your previous state or New York State County was	
	New York State DMV number	
	Last four digits of your Social Security number	
	I do not have a New York State driver's license or a Social Security number.	
Political party You must make 1 selection Political party enrollment is optional but that, in order to vote in a primary election of a political party, a voter must enroll in that political party, unless state party rules allow otherwise.	I wish to enroll in a political party ☐ Democratic party ☐ Working Families party ☐ Republican party ☐ Other ☐ Conservative party	
	I do not want to enroll in any political party and wish to be an independent voter No party	
All voters must date and sig	gn the oath below	
It is a crime to procure a fals	e registration or to furnish false information to the Board	d of Elections
Affidavit: I swear or af		
I am a citizen of the United StatesI will have lived in the county, city	Sign or village for at least 30 days before the election.	
I meet all requirements to registerThis is my signature or mark in the	to vote in New York State. box to the right. derstand that if it is not true, I can be	
	and/or jailed for up to four years. Appleted by an Election Inspector	Rev
Town/City	AD/Ward	Election District