

# HURON

Sheet No: 4  
 2 Election Districts  
 County of Wayne  
 Town of Huron  
 E.D.(S) 1, 2

## WAYNE COUNTY ABSENTEE/AFFIDAVIT/SPECIAL VOTERS' BALLOT FOR GENERAL ELECTIONS

1. Mark in pen or pencil.
2. To vote for a candidate whose name is printed on this ballot, make a single cross X in the voting square above the name of the candidate.
3. To vote for a person whose name is not printed on this ballot, write or stamp his or her name in a space that appears at the bottom of the column containing the title of the office.
4. To vote on a space that appears at the bottom of the column containing the title of the office, contained in the box setting forth such proposal.
5. Any other mark or writing, or an erasure made on this ballot outside the voting squares or blank spaces provided for voting will void this entire ballot.
6. Do not overvote. If you select a greater number of candidates than there are vacancies to be filled, your ballot will be void.
7. If you mark or deface, or write on, or scratch, or otherwise mark this ballot, call the Board of Elections at (315) 946-7400 for instructions on how to correct your ballot. If you attempt to correct mistakes on the ballot by making erasures or cross outs, Erasures will be considered as a vote for the candidate on the ballot. Prior to submitting your ballot, if you make a mistake in completing the ballot or wish to change your ballot choices, you may obtain and complete a new ballot. You have a right to a replacement ballot upon return of the original ballot.

### HOW TO RETURN ABSENTEE BALLOT

1. After marking the ballot, fold such ballot and enclose it in the envelope bearing the voter's statement, and seal the envelope.
2. Fill in properly the blanks in the statement and sign your name.
3. Enclose the sealed envelope bearing the statement in the envelope addressed to the Wayne County Board of Elections and mail promptly.

### HOW TO RETURN AFFIDAVIT BALLOT

1. After marking the ballot, fold such ballot and enclose it in the envelope bearing the voter's statement, and seal the envelope.
2. Fill in properly the blanks in the statement and sign your name.
3. Return the sealed envelope to the election inspector.

	YES		NO		YES		NO		7		8		9		10		11		12		13		14					
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
1	STATE SUPREME COURT JUSTICE 7th Judicial District (Vote for ONE)		2		3		4		5		6		7		8		9		10		11		12		13		14	
<input type="checkbox"/> 1B Republican <b>John Gallagher</b>	<input type="checkbox"/> 1C Conservative <b>John Gallagher</b>		<input checked="" type="checkbox"/> 2A Democratic <b>Michael D. Calarco</b>		<input type="checkbox"/> 3B Republican <b>Barry C. Virtz</b>		<input type="checkbox"/> 4B Republican <b>Michael P. Jankowski</b>		<input type="checkbox"/> 5B Republican <b>Laurie J. Crane</b>		<input type="checkbox"/> 6B Republican <b>Tammy A. Vezzose</b>		<input type="checkbox"/> 7B Republican <b>Kathy J. Wachtman</b>		<input type="checkbox"/> 8B Republican <b>David M. Urban</b>		<input type="checkbox"/> 9B Republican <b>David A. Buisch</b>		<input type="checkbox"/> 10B Republican <b>Richard N. Reyn</b>		<input type="checkbox"/> 11B Republican <b>Gerritt C. Reyn</b>							
<input type="checkbox"/> 1D Independence <b>John Gallagher</b>	<input checked="" type="checkbox"/> 2E Return <b>Michael D. Calarco</b>																											

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