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STATE OF RHODE ISLAND

IN GENERAL ASSEMBLY

JANUARY SESSION, A.D. 2013

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A N A C T

RELATING TO ELECTIONS -- MAIL BALLOTS

Introduced By: Senators McCaffrey, Lynch, and Lombardo

Date Introduced: February 28, 2013

Referred To: Senate Judiciary

(Board of Elections)

It is enacted by the General Assembly as follows:

1 SECTION 1. Section 17-20-13.1 of the General Laws in Chapter 17-20 entitled "Mail  
2 Ballots" is hereby amended to read as follows:

3 **17-20-13.1. Form of emergency mail ballot application.** -- The emergency mail ballot  
4 application to be subscribed by the voters before receiving a mail ballot shall, in addition to any  
5 directions that may be printed, stamped, or written on the application by authority of the secretary  
6 of state, be in substantially the following form:

7 STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS EMERGENCY  
8 APPLICATION OF VOTER FOR BALLOT FOR ELECTION ON\_\_\_\_\_

9 (COMPLETE HIGHLIGHTED SECTIONS)

10 NOTE - THIS APPLICATION MUST BE RECEIVED BY THE BOARD OF CANVASSERS  
11 OF YOUR CITY OR TOWN NOT LATER THAN 4:00 P.M. ON\_\_\_\_\_

12 BOX A (PRINT OR TYPE)

13 NAME

14 VOTING ADDRESS

15 CITY/TOWN STATE RI ZIP CODE\_\_\_\_\_

16 DATE OF BIRTH PHONE#\_\_\_\_\_

17 BOX B (PRINT OR TYPE)

18 NAME OF INSTITUTION (IF APPLICABLE)

19 ADDRESS

1 ADDRESS

2 CITY/TOWN STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

3 I CERTIFY THAT I AM ELIGIBLE FOR A MAIL BALLOT ON THE FOLLOWING BASIS:

4 (CHECK ONE ONLY)

5 ( ) 1. I am incapacitated to such an extent that it would be an undue hardship to vote at the polls  
6 because of illness, mental or physical disability, blindness or a serious impairment of mobility. If  
7 not voting ballot at local board, ballot will be mailed to the address in BOX A above or to the  
8 Rhode Island address provided in BOX B above. If the ballot is to be delivered by the local board  
9 of canvassers to a person presenting written authorization to pick up the ballot, complete BOX A  
10 above and fill in the person's name below.

11 I hereby authorize \_\_\_\_\_ to pick up my ballot at my  
12 local board of canvassers.

13 ( ) 2. I am confined in a hospital, convalescent home, nursing home, rest home, or similar  
14 institution within the State of Rhode Island. Provide the name and address of the facility where  
15 you are residing in BOX B above.

16 ( ) 3. I am employed or in service intimately connected with military operations or because I am  
17 a spouse or dependent of such person, or I am a United States citizen who will be outside the  
18 United States. If not voting ballot at local board, provide address in BOX B above.

19 ( ) 4. I may not be able to vote at the polling place in my city or town on the day of the election.  
20 If the ballot is not being mailed to your voter registration address (BOX A above) please provide  
21 the address within the United States where you are temporarily residing in BOX B above. If you  
22 request that your ballot be sent to your local board of canvassers please indicate so in BOX B  
23 above.

24 I hereby authorize \_\_\_\_\_ to pick up my ballot at my  
25 local board of canvassers.

26 ~~Under the pains and penalty of perjury, I certify that on account of the following circumstances~~  
27 ~~manifested twenty (20) days or less prior to the election for which I make this application. I will~~  
28 ~~be unable to vote at the polls.~~

29 BOX D OATH OF VOTER

30 I declare that all of the information I have provided on this form is true and correct to the best of  
31 my knowledge. I further state that I am not a qualified voter of any other city or town or state and  
32 have not claimed and do not intend to claim the right to vote in any other city or town or state. If  
33 unable to sign name because of physical incapacity or otherwise, applicant shall make his or her  
34 mark "X".

1 SIGNATURE IN FULL \_\_\_\_\_

2 Please note: A Power of Attorney signature is not valid in Rhode Island.

3 SECTION 2. This act shall take effect upon passage.

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EXPLANATION  
BY THE LEGISLATIVE COUNCIL  
OF  
A N A C T  
RELATING TO ELECTIONS -- MAIL BALLOTS

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1           This act would eliminate the requirement that a voter certify that the reason he or she has  
2 applied for an emergency mail ballot manifested itself twenty (20) days or less prior to the  
3 election.

4           This act takes effect upon passage.

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