

Official Primary Ballot for Nonpartisan Office and Referendum

Notice to voters: This ballot may be invalid unless initialed by 2 election inspectors. If cast as an absentee ballot, the ballot must bear the initials of the municipal clerk or deputy clerk.

Instructions to Voters	County	Municipal (Cont.)
<p>If you make a mistake on your ballot or have a question, see an election inspector. (Absentee voters: Contact your municipal clerk.)</p> <p>To vote for a name(s) on the ballot, fill in the oval next to the name like this <input type="radio"/>.</p> <p>To vote for a name that is not on the ballot, write the name(s) on the line marked "write-in," and fill in the oval next to the name like this <input type="radio"/>.</p>	County Executive Vote for 1	Town Treasurer Vote for 1
	<input type="radio"/> Candidate	<input type="radio"/> Candidate
	<input type="radio"/> Candidate	<input type="radio"/> Candidate
	<input type="radio"/> write-in:	<input type="radio"/> Candidate
	County Supervisor, District _ Vote for 1	<input type="radio"/> write-in: Town Constable Vote for 1
	<input type="radio"/> Candidate	<input type="radio"/> Candidate
	<input type="radio"/> Candidate	<input type="radio"/> Candidate
	<input type="radio"/> write-in:	<input type="radio"/> Candidate
Judicial	Municipal	School District
Justice of the Supreme Court Vote for 1	Town Board Chairperson Vote for 1	School Board Member Vote for not more than 3
<input type="radio"/> Candidate	<input type="radio"/> Candidate	<input type="radio"/> Candidate
<input type="radio"/> Candidate	<input type="radio"/> Candidate	<input type="radio"/> Candidate
<input type="radio"/> Candidate	<input type="radio"/> Candidate	<input type="radio"/> Candidate
<input type="radio"/> write-in:	<input type="radio"/> Candidate	<input type="radio"/> Candidate
Court of Appeals Judge, District _ Vote for 1	<input type="radio"/> Candidate	<input type="radio"/> Candidate
<input type="radio"/> Candidate	<input type="radio"/> write-in:	<input type="radio"/> Candidate
<input type="radio"/> Candidate	Town Board Supervisor Vote for not more than 2	<input type="radio"/> Candidate
<input type="radio"/> Candidate	<input type="radio"/> Candidate	<input type="radio"/> Candidate
<input type="radio"/> write-in:	<input type="radio"/> Candidate	<input type="radio"/> Candidate
Circuit Court Judge, Branch _ Vote for 1	<input type="radio"/> Candidate	<input type="radio"/> Candidate
<input type="radio"/> Candidate	<input type="radio"/> Candidate	<input type="radio"/> write-in:
<input type="radio"/> Candidate	<input type="radio"/> Candidate	<input type="radio"/> write-in:
<input type="radio"/> Candidate	<input type="radio"/> write-in:	<input type="radio"/> write-in:
<input type="radio"/> write-in:	<input type="radio"/> write-in:	<input type="radio"/> write-in:
	Town Clerk Vote for 1	
	<input type="radio"/> Candidate	
	<input type="radio"/> Candidate	
	<input type="radio"/> write-in:	
	<input type="radio"/> Candidate	
	<input type="radio"/> Candidate	
	<input type="radio"/> Candidate	
	<input type="radio"/> write-in:	
Page 1 of 2-sided ballot		Ballot continues on other side.

Referendum	Official Primary Ballot for Nonpartisan Office and Referendum	
<p>To vote in favor of a question, fill in the oval next to "YES," like this <input type="radio"/>.</p> <p>To vote against a question, fill in the oval next to "NO," like this <input type="radio"/>.</p>	February 17, 2015 for	
Municipal	_____	
Question 1: Shall the town....?	Municipality and ward #(s)	
<input type="radio"/> YES	Ballot issued by	
<input type="radio"/> NO	_____	
School District	_____	For Official Use Only
Question 1: Shall the school district...?	Initials of election inspectors	<i>Inspectors: Identify ballots required to be remade.</i>
<input type="radio"/> YES	Absentee ballot issued by	Reason for remaking ballot:
<input type="radio"/> NO	_____	<input type="checkbox"/> Overvoted <input type="checkbox"/> Damaged <input type="checkbox"/> Other
	Initials of municipal clerk or deputy clerk (If issued by SVDs, both SVDs must initial.)	Original Ballot No. or Duplicate Ballot No.
	Certification of Voter Assistance	_____ _____
	I certify that I marked this ballot at the request and direction of a voter who is authorized under the law to receive assistance.	

	Signature of assistor	
Page 2 of 2-sided ballot		Ballot begins on other side.

NOTE: ADD ANY OFFICES THAT REQUIRE A PRIMARY TO THIS BALLOT. ELIMINATE ANY OFFICES THAT DO NOT REQUIRE A PRIMARY FROM THIS BALLOT.