



TOWN CLERK

TOWN OF BECKET
557 Main Street, Becket, MA 01223
TOWN HALL – (413) 623-8934
FAX – (413) 623-6036

May 6, 2020

To the Registered Voters of the Town of Becket:

RE: Annual Town Election to be held June 13th, 2020, noon to 4:00pm; Absentee Ballots available to all registered voters to further social distancing.

PLEASE TAKE NOTICE: Due to concerns over the Covid-19 pandemic the Board of Selectmen in consultation with the Town Clerk have delayed the Town of Becket's Annual Town Election.

The Town of Becket's Annual Town Election will be held on Saturday June, 13, 2020 at Ward 0, Precinct 1 in the Community Room on the lower rear level of the Town Hall, located at 557 Main Street, Becket, MA. The polls will be open from Noon until 4:00 PM.

Also, because of the Covid-19 pandemic, Absentee Ballots will be available to those voters who wish to maintain social distancing and not appear in person at the polls. Of course, absentee ballots will continue to be available to those who need them for the traditional reasons: inability to vote at the polls because of absence from town during polling hours, disability or religious beliefs.

Attached herewith please find Absentee Ballot Applications. You may fill out the Absentee Ballot Application, making sure to sign it, and then mail it to: Town Clerk, 557 Main Street, Becket, MA 01223 to request that an absentee ballot be mailed to you. Absentee Ballot Applications may also be downloaded from the Town of Becket web page at <https://www.townofbecket.org> under the NEWS tab, or the Secretary of the Commonwealth's web page at <https://www.sec.state.ma.us/ele/eleabsentee/absidx.htm>

I strongly recommend that you vote by absentee ballot so as to limit the possible exposure of our voters and our poll workers to Covid-19. If you have any questions, or need further information please do not hesitate to contact me by telephone at 413-623-8934 ext. 111 or by e-mail at townclerk@townofbecket.org.

Very truly yours,

George E. Roberts
Town Clerk

Massachusetts Official
Absentee Ballot Application

See reverse side for instructions



William Francis Galvin
Secretary of the Commonwealth

**Voter
Information**

1

Name: _____

Legal Voting Residence: _____

Date of Birth: _____ Telephone Number: _____

E-mail Address: _____

**Ballot
Information**

2

Mail Ballot to: _____

Ballot Requested For:

☐ All elections this year

☐ All general elections (No primaries)

☐ A specific election: _____
Date of Election

Party (only if requesting primary ballot):

State Primaries: _____

Presidential Primary: _____

**Special
Circumstances**
(If applicable)

3

☐ This application is being made by a family member of the voter.

Relationship to voter: _____

☐ Voter is a member of military on active duty or dependent family member of active duty personnel.

☐ Voter is a Massachusetts citizen residing overseas.

☐ Voter has been admitted to a healthcare facility after noon on the fifth day before the election and has designated the following person to hand-deliver the ballot: _____

☐ Voter required assistance in completing application due to physical disability.

Assisting person's name: _____

Assisting person's address: _____

Signed (under penalty of perjury): _____ Date: _____