



TOWN OF WESTMINSTER

OFFICE OF THE TOWN CLERK

P.O. BOX 147 WESTMINSTER, VT 05158

Tel. 802-722-4091 Fax 802-722-9816

westminstervt.org

Westminster Residents

are urged to VOTE!

March 3, 2026, at the Westminster Institute

3534 US Route 5, Westminster, VT

Town Meeting

February 28, 2026

Warning/Articles

can be reviewed at westminstervt.org

Request an Absentee Ballot

Voters can request absentee ballots online through the VT voter portal, <https://vote.vermont.gov/public/dashboard>, by paper form in person at the Westminster Town Clerk's Office or by email, clerk@westminstervt.org. The ballot must be returned to the Clerk before the polls close at 7:00 p.m. on Tuesday (March 3, 2026).

Authorized family members or health care providers can request absentee ballots on a voter's behalf. However, they cannot pick up the ballot on their behalf. Only individual voters may receive their ballot. When requesting on behalf of another person, the ballot will be mailed.

Vermont Absentee Ballot Request

Save time. Request a ballot online at vote.vermont.gov.

Use this form to request absentee ballots for elections in 1 calendar year. All absentee voters must submit a new request each year.

Your name

If your name has changed, provide your former name.

1

Last name _____ First name _____
Middle name _____ Former name _____

Residential address

This is where you currently live and are registered to vote.

2

Address (not P.O. Box) _____
City or Town _____ State **VT** Zip _____

Mailing address

Provide the address where you receive mail. This is where we will send your ballot.

3

☐ Same as residential address in section 2
Address or P.O. Box _____
City or Town _____ State _____ Zip _____

Election

Choose the elections that you want to vote by mail in.

You can choose each election or you can choose the period that you want to receive absentee ballots for.

You can choose elections for 1 calendar year.

4

☐ I want to vote by mail in the following elections:

- ☐ Annual Town Meeting
☐ All local elections
☐ General Election
☐ Primary Election
☐ Presidential Primary Election (Choose a party)
☐ Democratic ☐ Republican

Or

☐ I want to vote by mail during the following period (within 1 calendar year):

Start sending me ballots on (mm/dd/yyyy) _____

Stop sending me ballots on (mm/dd/yyyy) _____

Military, overseas civilian, ill or with disability voters
If applicable

5

My voter type (check 1): ☐ Military (active in U.S. or overseas) ☐ Overseas voter ☐ Ill or with disability

I want my ballot delivered by (check 1):

- ☐ Email (ballots cannot be returned electronically) _____
☐ Fax _____
☐ Mail _____
☐ Two Justices of the Peace (only if you are ill or with a disability). Phone _____

Contact information

This is helpful if we have a question. Confidential.

6

Phone _____ Email _____

Requesting a ballot for someone else?

If yes, the requester must complete and sign this section.

7

Requester's name _____ Relationship to voter
☐ Family member
☐ Health care provider
☐ Person authorized by voter
Organization name (if applicable) _____
Requester's address _____
Requester's phone _____

Signature
Required

Voter or requester, sign and date here (Required)

X _____

Date (mm/dd/yyyy) _____

8

Return your completed and signed form to your Town Clerk. You can:

- Mail it or drop it off in person
- Email it

Find your Town Clerk's mailing address and email address at tinyurl.com/vtclerks.

Track this request and your ballot at vote.vermont.gov.

2025.06

Official use only

- ☐ Voted in office
☐ Ballot picked up at clerk's office

Date of request _____ Ballot mailed date _____ Ballot returned date _____