DECLARATION OF QUALIFICATION TO VOTE IN
CHEMUNG COUNTY LIBRARY DISTRICT TRUSTEE ELECTION

Name of Voter _____________________________________________________________________________
(please print)

Street Address ___________________________________________________________________________

City/State/Zip _____________________________________________________________________________

County: Chemung    Library District # __________________

I do declare and affirm that I am a duly registered voter of the Chemung County Library District,
and that on this day of the CCLD Trustee Election, I am:

    ______ Eighteen (18) years of age or over

    ______ A Citizen of the United States    and

    ______ I am qualified to vote in library district shown above.

_________________________________________  ____________________________
Signature of Resident                        Date

_________________________________________  ____________________________
Signature of Election Officer                Date
November 7, 2017

State of New York *Chemung County Library District* Trustee Election

Instructions:
Write In your choice for Trustee in the space provided below.

Library Trustee District #14
Representing: Southport

Write In: