

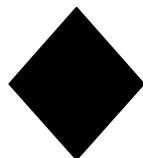
VILLAGE OF STILLWATER

1. MARK IN PEN HAVING BLUE OR BLACK INK OR WITH PENCIL HAVING BLACK LEAD

2. TO VOTE FOR A CANDIDATE WHOSE NAME IS PRINTED ON THIS BALLOT MAKE A SINGLE CROSS MARK (x) OR A SINGLE CHECK (✓) IN THE VOTING SQUARE TO THE RIGHT OF AN EMBLEM OPPOSITE THEIR NAME



3. TO VOTE FOR A PERSON WHOSE NAME IS NOT PRINTED ON THIS BALLOT WRITE HIS OR HER NAME IN THE BLANK SPACE AT THE BOTTOM OF THE COLUMN UNDER WHICH THE TITLE OF THE OFFICE APPEARS.



4. ANY OTHER MARK OR WRITING, OR ANY ERASURE ON THIS BALLOT OUTSIDE THE VOTING SQUARES OR BLANK SPACES PROVIDED FOR VOTING WILL VOID THIS ENTIRE BALLOT.

5. IF YOU TEAR, OR DEFACE, OR WRONGLY MARK THIS BALLOT, RETURN IT AND OBTAIN ANOTHER.

<p>1 TRUSTEE 4 Year Term Vote for Any 2</p>	
<p>1A Heart Eunice Marshall</p>	
<p>1B</p>	
<p>Write In</p>	

PROPOSITION NO. 1

Shall the month of the General Village Election of the Village of Stillwater be changed from March to November to coincide with the date of the General New York State Election (the Tuesday next succeeding the first Monday in November)?

YES NO