APPLICATION FOR VOTE BY MAIL BALLOT

Please type or print clearly in ink. All information required unless marked optional.

1 **I hereby apply for a Mail-In Ballot for the:** (CHECK ONLY ONE)

☐ General (November) ☐ Primary ☐ Municipal ☐ School* ☐ Fire

☐ Special _____ (Specify) To be held on ___/___/___ (Date)

** By applying for the April Annual School Election, you will receive a Mail-In Ballot for all Special School Elections until the next Annual School Election.*

SPECIAL STATUS

Check if you are:

☐ Active Duty Military Voter
☐ Overseas Voter
☐ None of the Above

2

Last Name (Type or Print)	First Name (Type or Print)	Middle Name or Initial	Suffix (Jr., Sr., III)

3 **Address at which you are registered to vote**

Street Address or RD#	Apt.

Municipality (City/Town)	State	Zip

4 **Mail my ballot to the following address:** ☐ Same Address as Section 3

Please include any PO Box, RD#, State/Province, Zip/Postal Code & Country (if outside US)

_____
_____
_____
_____
_____

5 Date of Birth ___/___/___

6 Day Time Phone Number ( )

7 E-Mail Address (Optional)

8 **Signature** Please sign your name as it appears in the Poll Book.

X _____

9 Today's Date ___/___/___

OPTIONAL - ONLY COMPLETE SECTIONS 10 THROUGH 12 IF APPLICABLE

10 **Voter Options to Automatically Receive Ballots in Future Elections**

You may choose either option, both options, or none of the options. ***YOU ARE NOT REQUIRED TO CHOOSE AN OPTION.***
If you do not choose any option, you will only be sent the ballot for the election you chose in Section 1.

* **A** ☐ I wish to receive a Mail-In Ballot for all elections to be held during the **REMAINDER OF THIS CALENDAR YEAR**.

* **B** ☐ I wish to receive a Mail-In Ballot in **ALL FUTURE NOVEMBER GENERAL ELECTIONS**, until I request otherwise.

** Please Note: Your ballot can only be sent to the mailing address supplied on this application; if your address changes, you must notify the County Clerk in writing.*

11 **Assistor**

Any person providing assistance to the voter in completing this application must complete this section.

Name of Assistor (Type or Print)	Signature of Assistor	Date
	X	___/___/___

Address	Apt.	Municipality (City/Town)	State	Zip

12 **Authorized Messenger**

Any voter may apply for a Mail-In Ballot by Authorized Messenger. Messenger shall be a family member or a registered voter of this County. No Authorized Messenger can (1) be a Candidate in the election for which the voter is requesting a Mail-In Ballot or (2) serve as messenger for more than TEN qualified voters per election.

I designate _____ **to be my Authorized Messenger.**
Print Name of Authorized Messenger

Address of Messenger	Apt.	Municipality (City/Town)	State	Zip	Date of Birth
					___/___/___

Signature of Voter X _____ Date ___/___/___

STOP Authorized Messenger must sign application and show photo ID in the presence of the County Clerk or County Clerk designee.

"I do hereby certify that I will deliver the Mail-In Ballot directly to the voter and no other person, under penalty of law."

Signature of Messenger	Date
X	___/___/___

OFFICE USE ONLY

Voter Reg # _____

Muni Code #_____ Party _____

Ward _____ District _____

Erma Gormley, Sussex County Clerk
Hall of Records
83 Spring Street, Suite 304
Newton, NJ 07860

OFFICIAL ELECTION MAIL™
Authorized by the U.S. Postal Service

VOTING INFORMATION

1. You must be a registered voter in order to apply for a Mail-In Ballot.
2. Once you apply for a Mail-In Ballot, you will not be permitted to vote by machine at your polling place in the same election.
3. You will receive instructions with your ballot.
4. Your Mail-In Ballot must be received by the County Board of Election before close of polls on Election Day.
5. Do not submit more than one application for the same election.
6. You must apply for a Mail-In Ballot for each election, unless you designate otherwise under **"Voter Options."**

INSTRUCTIONS

- Fill out application.
- Print and sign your name where indicated.
- **Mail or Deliver** application to the County Clerk.

DO NOT FAX OR E-MAIL

Unless you are a Military or Overseas Voter

PLEASE NOTE

A voter may apply for a Mail-In Ballot by mail up to 7 days prior to the election. He or she may also apply in person to the County Clerk until 3 P.M. the day before the election.

Note also that voters have an option of indicating on an application for a Mail-In Ballot that they would prefer to receive a ballot for each election that takes place during the remainder of the calendar year.

Voters also now have an option of automatically receiving a Mail-In Ballot for each General Election. If such voter no longer wants this option, the County Clerk's office must be notified in writing.

WARNING

This application must be received by the County Clerk not later than 7 days prior to the election, unless you apply in person or via an authorized messenger during County Clerk's office hours, but no later than 3 P.M. the day prior to the election.

MAIL-IN BALLOT APPLICATION
Erma Gormley, Sussex County Clerk
Hall of Records
83 Spring Street, Suite 304
Newton, NJ 07860

Name

Street Address

Municipality State Zip Code

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