

# Voting by Mail in New Jersey: How to complete the Vote-by-Mail Application

## APPLICATION FOR VOTE BY MAIL BALLOT

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

1. - Why are you completing this form? Do you want to vote by mail in all future elections, or do you just want to vote by mail in one election coming up? Check only one box.

NOTE: If you are a Military Voter or an Overseas Voter, you must also check the box that applies in the right-hand blue box.

3. - At which address are you registered to vote?

5. & 6. - Include your Date of Birth and a Phone Number.

8. & 9. - Sign your name the same way you sign the poll book because your signatures must match. Don't forget to date the application.

10. - Did anyone assist you in completing this application? If "Yes," that person must complete this section, including a signature. If "No," leave blank.

11. - Only complete Section 11 if you are authorizing a messenger to pick-up and deliver your mail-in ballot. You must sign the form again.

<b>1</b>	<b>I hereby apply for a Mail-In Ballot for:</b> <b>(CHECK ONLY ONE)</b> <input type="checkbox"/> ALL FUTURE ELECTIONS, until I request otherwise in writing. Or for ONLY ONE of the following: <input type="checkbox"/> General (November) <input type="checkbox"/> Primary (June) <input type="checkbox"/> Municipal <input type="checkbox"/> School <input type="checkbox"/> Fire <input type="checkbox"/> Special _____ To be held on ____ / ____ / ____ (Specify) (MM / DD / YYYY)			<b>MILITARY/OVERSEAS VOTER ONLY</b> I request Vote-By-Mail Ballots for all elections in which I am eligible to vote and I am <b>(CHECK ONLY ONE)</b> <input type="checkbox"/> A Member of the Uniformed Services or Merchant Marine on active duty, or an eligible spouse or dependent. <input type="checkbox"/> A U.S. Citizen residing outside the U.S. and I intend to return. <input type="checkbox"/> A U.S. Citizen residing outside the U.S. and I do not intend to return. <input type="checkbox"/> A U.S. Citizen residing outside the U.S. and I have never lived in the U.S.	
	<b>PLEASE NOTE: Your ballot can only be sent to the mailing address supplied on this application. If your mailing address changes, you must notify the County Clerk in writing.</b>				
<b>2</b>	Last Name (Type or Print)	First Name (Type or Print)	Middle Name or Initial	Suffix (Jr., Sr., III)	
<b>3</b>	<b>Address at which you are registered to vote:</b> Street Address or RD# _____ Apt. _____ Municipality (City/Town) _____ State _____ Zip _____		<b>Mail my ballot to the following address:</b> <input type="checkbox"/> Same Address as Section 3 <input type="checkbox"/> _____ Please include any PO Box, RD#, State/Province, Zip/Postal Code & Country (if outside US)		
	<b>4</b>		<b>4. - Check the box if you want your ballot to be sent to the address you listed in Section 3. If you want your ballot to be sent to a different address, write that address in #4.</b>		
<b>5</b>	Date of Birth (MM / DD / YYYY) _____ / _____ / _____	<b>6</b>	Day Time Phone Number ( ) _____ - _____	<b>7</b>	E-Mail Address (Optional) _____
<b>8</b>	<b>Signature</b> _____ Please sign your name as it appears in the Poll Book.			<b>9</b>	Today's Date (MM / DD / YYYY) _____ / _____ / _____

### OPTIONAL - ONLY COMPLETE SECTIONS 10 OR 11 IF APPLICABLE

<b>10</b>	<b>Assistor:</b> 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 (MM / DD / YYYY) _____ / _____ / _____ Address _____ Apt. _____ Municipality (City/Town) _____ State _____ Zip _____				
	<b>Authorized Messenger:</b> 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 THREE qualified voters per election. I designate _____ to be my Authorized Messenger. Address of Messenger _____ Apt. _____ Municipality (City/Town) _____ State _____ Zip _____ Date of Birth (MM / DD / YYYY) _____ / _____ / _____ Signature of Voter _____ Date (MM / DD / YYYY) _____ / _____ / _____				
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p><b>STOP</b> Authorized Messenger must sign application and show photo ID in the presence of the County Clerk or County Clerk designee.</p> <p>"I do hereby certify that I will deliver the Mail-In Ballot directly to the voter and no other person, under penalty of law."</p>                 Signature of Messenger _____ Date (MM / DD / YYYY) _____ / _____ / _____ </div> <div style="width: 35%; text-align: center;"> <p><b>OFFICE USE ONLY</b></p>                 Voter Reg # _____                  Muni Code # _____ Party _____                  Ward _____ District _____             </div> </div>					

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11. - Your authorized messenger will sign and date in the presence of the County Clerk or the Clerk's designee.

NOTE: In New Jersey, you do not need a reason to apply for a mail-in ballot, previously known as an absentee ballot.