	APPLICATION F	OR V	ΟΤΕ	BY	MAIL	Ball	ΟΤ
1	Please type or print clearly in ink. All information required unless I hereby apply for a Mail-In Ballot for (CHECK ONLY ONE) General (November) Primary Municipal Special (Specify) 	r the:	<i>I.</i> □ Fire	I request Vo eligible to vo A Member duty, or an A U.S. Citi	ote and I am (I of the Uniformed eligible spouse of zen residing outs	lots for all ele MARK ONLY Services or Me or dependent. ide the U.S. and	ections in which I am
2	Last Name (Type or Print) First	st Name (Type or F	Print)	I	Viddle Name c	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 Pice Sta Zip.	lail my ball ne following ase include any - D Box, RD#, - te/Province, (Postal Code - & Country butside US) -		Same /	Address as Section 3
5	Date of Birth	none Number		7 E-Mail	Address (Optiona	l)	
8	Signature Please sign your name as it appears in the Poll Book. 9 1 1						
	OPTIONAL - ONLY COMPLE	TE SECT	IONS 1	0 THRO	UGH 12 IF	APPLICA	BLE
10	Voter Options to Automatically I You may choose either option, both options, or no If you do not choose any option, you will only be a *A I wish to receive a Mail-In Ballot for a *B I wish to receive a Mail-In Ballot in AL *Please Note: Your ballot can only be sent to the mailing address	one of the opt sent the ballot Il elections to LL FUTURE	ions. YO t for the e b be held NOVEM	U ARE NOT lection you during the BER GENI	REQUIRED chose in Section REMAINDE ERAL ELECT	TO CHOOSE on 1. R OF THIS (TIONS, until	CALENDAR YEAR. I request otherwise.
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						Date / /
	Address		Apt.	Municipality	y (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/ /						
	Authorized Messenger must sign application and show photo in the presence of the County Clerk or County Clerk designed "I do hereby certify that I will deliver the Mail-In Ballot directly t the voter and no other person, under penalty of law." Signature of Messenger			ID	OFFICE USE ONLY Voter Reg # Muni Code # Party Ward District		

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

VOTING INFORMATION

- 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.
- 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."

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.

> Place Postage Here Before Mailing



Street Address

Name

City, State, Zip Code

APPLICATION FOR VOTE BY MAIL BALLOT

Timothy D. Tyler Burlington County Clerk Courts Building, Room 104 P.O. Box 6000, 49 Rancocas Road Mount Holly, NJ 08060-1397



Please Seal with Tape and Return