**APPLICATION FOR VOTE BY MAIL BALLOT**

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

I hereby apply for a Mail-In Ballot for:

(CHECK ONLY ONE)

- [ ] ALL FUTURE ELECTIONS, until I request otherwise in writing.
- [ ] Or for ONLY ONE of the following:  
  - General (November)
  - Primary (June)
  - Municipal
  - School
  - Fire
  - Special (Specify) To be held on (MM/DD/YYYY)

**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.

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  - School
  - Fire
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**If you are military/overseas voter, check one:**

- [ ] A Member of the Uniformed Services or Merchant Marine on active duty, or an eligible spouse or dependent.
- [ ] A U.S. Citizen residing outside the U.S. and I intend to return.
- [ ] A U.S. Citizen residing outside the U.S. and I do not intend to return.
- [ ] A U.S. Citizen residing outside the U.S. and I have never lived in the U.S.

**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)

**I request Vote-By-Mail Ballots for all elections in which I am eligible to vote and I am (CHECK ONLY ONE):**

- [ ] MILITARY/OVERSEAS VOTER ONLY
  - [ ] A Member of the Uniformed Services or Merchant Marine on active duty, or an eligible spouse or dependent.
  - [ ] A U.S. Citizen residing outside the U.S. and I intend to return.
  - [ ] A U.S. Citizen residing outside the U.S. and I do not intend to return.
  - [ ] A U.S. Citizen residing outside the U.S. and I have never lived in the U.S.

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

- Street Address or RD#
- Apt.
- Municipality (City/Town)
- State
- Zip

**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)

**Signature**

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

Signature: X ________________

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

**Date of Birth (MM/DD/YYYY)**

/ / /

**Today’s Date (MM/DD/YYYY)**

/ / /

**Signature of Voter**

X ________________

**Signature of Assistor**

X ________________

**Date (MM/DD/YYYY)**

/ / /

**Address of Assistor**

Apt.
Municipality (City/Town)
State
Zip

**Date of Birth (MM/DD/YYYY)**

/ / /

**Date of Birth (MM/DD/YYYY)**

/ / /

**Signature of Messenger**

X ________________

**Date (MM/DD/YYYY)**

/ / /

**STOP**

“**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 (MM/DD/YYYY)**

/ / /

**OFFICE USE ONLY**

Voter Reg # __________________________

Muni Code #_______ Party ________________

Ward __________ District ________________

NJ Division of Elections · 08/18
APPLICATION FOR VOTE BY MAIL BALLOT

Place
Postage
Here
Before
Mailing

Name
Street Address
City, State, Zip Code

_________________________________
_________________________________
_________________________________

WARNING

This application must be received by the County Clerk's office 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. Check not later than 7 days prior to the election.

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.

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

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. If returning your Mail-in Ballot in person it must be received by the County Board of Elections before close of polls on Election Day.
5. If returning your Mail-in Ballot by mail, it must be postmarked no later than Election Day and received by the County Board of Elections no later than 48 hours after the closing of the polls for the election.

INSTRUCTIONS

· Fill out application.
· Print and sign your name where indicated.
· Mail or deliver application to the County Clerk.

Please Seal with Tape and Return

Joanne Schwartz
County Clerk
50 Rancocas Road
PO Box 6000
Mount Holly, NJ 08060-6000

Burlington County Clerk

Do NOT FAX OR E-MAIL