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:		MILITARY/OVERSEAS VOTER ONLY I request Vote-By-Mail Ballots for all elections in which I am eligible to vote and I am (CHECK ONLY ONE)				
1	☐ ALL FUTURE ELECTIONS, until I request otherwise in writing.						
	Or for ONLY ONE of the following: General (November)		☐ A Member of the Uniformed Services or Merchant Marine on				
	☐ Primary (June) ☐ Municipal ☐ School ☐ Fire		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.				
	☐ SpecialTo be held on/		☐ A U.S. Citizen residing outside the U.S. and I have never lived in the U.S.				
	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.						
2	Last Name (Type or Print) First Name (Type or Print)		Middle Name or Initial Suffix (Jr., Sr., III)		Suffix (Jr., Sr., III)	
	Address at which you are registered to vote: Street Address or RD# Apt.		Mail my ballot to the following address: Same Address as Section 3 Please include any PO Box, RD#,				
3							
	Municipality (City/Town) State Zip	_ 4	State/Prov	vince, Code ————————————————————————————————————			
	State 21p		& Coun				
			(if outside US)				
5	Date of Birth (MM / DD / YYYYY) Day Time Phone Nur ()	mber	7	-Mail Address (Optional)			
	Signature: I affirm that I am the person who is applying for this ballot and I live at the address designated in box 3 of this form. Today's Date (MM/DD/YYYY) 9						
8							
	X				·	·	
OPTIONAL - ONLY COMPLETE SECTIONS 10 OR 11 IF APPLICABLE							
	Assistor: Any person providing assistance to the	e voter ii	oter in completing this application must complete this section.				
10	Name of Assistor (Type or Print)	ignature of Assistor			Date (MM / DD / YYYY)		
	Address		Apt. Municipality (City/Town)				
	Address	Apt.	Munici	Dailty (Gity/Town)	State	Zip	
	Authorized Messenger:					1	
	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. Print Name of Authorized Messenger						
	Print Name of Authorized Messenge		y (City/Town)		State Zip Date of Birth (M		
	Autress of Messeriger	umorpani	y (*). ,	Otate Zip	Da		
11	Signature of Voter X / Date (MM/DD/YYYY)						
	Authorized Messenger must sign application and in the presence of the County Clerk or County C		ignee.				
	"I do hereby certify that I will deliver the Mail-In Bathe the voter and no other person, under penalt			Voter Reg #			
	6: 1 (1)		/ DD / YYYY)	Muni Code # Party			
	X	,	1	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

1. You must be a registered voter in order to apply for a Mail-In Ballot.

/OTING INFORMATION

- 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.
- . If returning your Mail-In Ballot in person it must be received after the time of the closing of the polls for the election be postmarked no later than Election Day and received by Election Day. If returning your Mail-In Ballot by mail, it must by the County Board of Elections before close of polls or the County Board of Elections no later than 48 hours
- 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 Section 1.

PLEASE NOTE

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

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

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

Name

Street Address

City, State, Zip Code



PLACE Postage HERE **B**EFORE MAILING

APPLICATION FOR VOTE BY MAIL BALLOT

Christine Giordano Hanlon Monmouth County Clerk 300 Halls Mill Road

Freehold, NJ 07728

