**APPLICATION FOR VOTE BY MAIL BALLOT**

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

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**I hereby apply for a Mail-In Ballot for:**

(DOWN 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 __________ To be held on ______/____/____

**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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**Mail my ballot to the following address:**

- [ ] Same Address as Section 3

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

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**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.

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

**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 (MM/DD/YYYY)**

**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 THREE qualified voters per election.

- **I designate __________________________ to be my Authorized Messenger.**
  - **Address of Messenger**
  - **Print Name of Authorized Messenger**
  - **Date of Birth (MM/DD/YYYY)**

**Signature of Voter**

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**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**

**OFFICE USE ONLY**

- **Voter Reg # __________________________**
- **Muni Code #_______ Party __________**
- **Ward ___________ District ___________**

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**NJ Division of Elections - 09/20**
APPLICATION FOR VOTE BY MAIL BALLOT

Name
Street Address
City, State, Zip Code

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.

PLEASE NOTE
1. 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.

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 may receive instructions with your ballot.

4. If returning your Mail-In Ballot in person, it must be received by the County Board of Elections no later than the closing of the polls for the election.

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.

6. Do not submit more than one application for the same election.

7. You must apply for a Mail-In Ballot for each election, unless you designate otherwise under Section 1.

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 may receive instructions with your ballot.

4. If returning your Mail-In Ballot in person, it must be received by the County Board of Elections no later than the closing of the polls for the election.

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.

6. Do not submit more than one application for the same election.

7. You must apply for a Mail-In Ballot for each election, unless you designate otherwise under Section 1.

INSTRUCTIONS
- Fill out application.
- Print and sign your name where indicated.
- Mail or deliver application to the County Clerk.
- Hand deliver to:
  - Office of the County Clerk, Election Division, County Administration Building, 600 Market Street, Suite 316, Camden NJ 08102

Edward P. McGettigan
Atlantic County Clerk
5901 Main Street
Mays Landing, NJ 08330-1797

Please Seal with Tape and Return