APPLICATION FOR VOTE BY MAIL BALLOT FOR THE JULY 7, 2020 PRIMARY ELECTION IN ACCORDANCE WITH EXECUTIVE ORDER #144

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

1	I hereby apply for a Mail-In Ballot for the July 7, 2020 Primary Election:												
	PLEASE NOTE: Your ballot can only be sent to the mailing address supplied on this application.												
2	Last Name (Type or Print) First Na			Name (Type or Print)			N	∕liddle Nam	e or Initi	al	Suffix (Jr., Sr., III)		
	Address at which you are reg	istered	to vote:			Mail my	ballo	t to the fo	llowing	g addre	ess:		
	Street Address or RD# Apt.					_	Address as Section 3						
3				4		Please inc							
J	Municipality (City/Town) Stat		Zip		4	any PO Box, RDi State/Province, Zip/Postal Code							
	Mariopality (5-9: 500)	Otale	۲۱۲			& Count	ry						
		<u> </u>	<u> </u>			(if outside							
5	In order to receive a ballot for the July 7, 2020 Primary Election you must declare one of the following Political Party Affiliations. Democratic Party Republican Party												
6	Date of Birth (MM / DD / YYYYY)	Day Ti	me Phone	Number		8	-Mail A	Address (Opt	ional)				
	Cignosturos L. (7)	1	1							Todov-	Data (MM / DD / VVA)	^	
9	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)										')		
										1	1		
	X												
						10110							
	OPTIONAL - O	NLY (COMPLE	TE S	ECT	IONS 1	1 OR	712 IF A	PPLIC	ABL			
	Assistor: Any person provide	ling ass	sistance to				ng this	s application	on mus				
11	Name of Assistor (Type or Print)			Signature of Assistor							Date (MM / DD / YYYY)		
				X			100 - 17	III (0) (T			/ /		
	Address		Apt. Municip			ality (City/Town) State			e Zip				
	Authorized Messenger	:									I		
	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												
	Address of Messenger Apt.			Municipality (City/Town)				State Zip		Date of Birth (MM / DD / YYYYY)			
											1 1		
12	Signature of Voter X Date (MM/DD/YYYY)												
	Authorized Messenger must sign application and show photo ID in the presence of the County Clerk or County Clerk designee.									ONLY			
	"I do hereby certify that I will deliver the Mail-In Ballot dire the voter and no other person, under penalty of law."					tly to	Voter Reg #						
	Signature of Messenger	-	Date (MM / DD / YYYY)			Muni Code # Part							
	X	1	1	Ward District					_				

Name					
Street Address	 	 	 	 	

City, State, Zip Code



PLACE POSTAGE HERE **BEFORE** MAILING

APPLICATION FOR VOTE BY MAIL

Ann F. Grossi Morris County Clerk P.O. Box 315

Morristown, NJ 07963-0315

INSTRUCTIONS

Election by completing and returning a Party Declaration Form to you

County Commissioner of Registration.

the Democratic or Republican party to receive that Party's Vote by Mai

Ballot. You may return to an Unaffiliated status following the Primary

Fill out application.

Mail or Deliver application to the County Clerk Fold and tape the **TOP** of the application. Print and sign your name where indicated

County Election Official's address is on the outside If returning this form by mail, be sure that the panel with your Please DO NOT STAPLE this form. Seal with Tape and Return.

Unless you are a Military or Overseas Voter DO NOT FAX OR E-MAIL

PLEASE NOTE

A voter may apply for a Mail-In Ballot by mail up to 7 days prior Clerk prior to 8 P.M. the day of the election. to the election. A voter may also apply in person to the County person or via an authorized messenger during County Clerk's later than 7 days prior to the election, unless you apply in This application must be received by the County Clerk no WARNING

ffice hours, prior to 8 P.M. the day of the election

VOTING INFORMATION

entitled to vote in the July 7, 2020 Primary Election a registered Unaffiliated voter or a voter with an Inactive status that is voters and Inactive Democratic and Republican registered voters Primary Election. You are receiving this application because you are which requires the County Clerk to send all Unaffiliated registered Governor Murphy signed Executive Order No. 144 on May 15, 2020 In light of the ongoing novel coronavirus (COVID-19) pandemic Vote-by-Mail Ballot application for the upcoming July 7, 2020

must complete this form to declare a party affiliation in order to obtain Unaffiliated voters currently registered to receive vote-by-mail ballots vote-by-mail ballot for the July 7, 2020 Primary Election.

Because New Jersey is a closed Primary Election state, in order to receive a ballot, an Unaffiliated voter must choose to be affiliated with

APPLICATION FOR VOTE BY MAIL BALLOT



MAILING RELOKE HERE Postage PLACE

Morristown, NJ 07963-0315 P.O. Box 315 Morris County Clerk