

VOTE BY MAIL

NOTICE TO PERSONS WANTING MAIL-IN BALLOTS

APPLICATION FOR VOTE BY MAIL BALLOT

If you are a qualified and registered voter of the State who wants to vote by mail in the Green Township Board of Education Special School Election to be held on **TUESDAY, March 13, 2018**, kindly complete the application form and send to the undersigned, or write or apply in person to the undersigned at once requesting that a mail-in ballot be forwarded to you. The request must state your home address and the address to which the ballot should be sent. The request must be dated and signed with your signature.

If any person has assisted you to complete the mail-in ballot application, the name, address and signature of the assistor must be provided on the application, and you must sign and date the application for it to be valid and processed. No person shall serve as an authorized messenger or as a bearer for more than three qualified voters in an election. No person who is a candidate in the election for which the voter requests a mail-in ballot may provide any assistance in the completion of the ballot or may serve as an authorized messenger or bearer.

No mail-in ballot will be provided to any applicant who submits a request therefor by mail unless the request is received at least seven days before the election and contains the requested information. A voter may, however, request an application in person from the county clerk up to 3 p.m. of the day before the election.

Voters who want to vote only by mail in all future general elections in which they are eligible to vote, and who state that on their application shall, after their initial request and without further action on their part, be provided a mail-in ballot by the county clerk until the voter requests that the voter no longer be sent such a ballot. A voter's failure to vote in the fourth general election following the general election at which the voter last voted may result in the suspension of that voter's ability to receive a mail-in ballot for all future general elections unless a new application is completed and filed with the county clerk.

Voters also have the option of indicating on their mail-in ballot applications that they would prefer to receive mail-in ballots for each election that takes place during the remainder of this calendar year. Voters who exercise this option will be furnished with mail-in ballots for each election that takes place during the remainder of this calendar year, without further action on their part.

Application forms may be obtained by applying to the undersigned either in writing or by telephone, or the application form provided may be completed and forwarded to the undersigned.

Dated: January 14, 2018



Jeffrey M. Parrott, Sussex County Clerk
83 Spring Street, Suite 304
Newton, NJ 07860
973-579-0900

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

MILITARY/OVERSEAS VOTER ONLY

I request Vote-By-Mail Ballots for all elections in which I am eligible to vote and I am **(MARK ONLY 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.

1 I hereby apply for a Mail-In Ballot for the: (CHECK ONLY ONE)

General (November) Primary Municipal School Fire

Special _____ To be held on ____/____/____ (Specify) (Date)

2 Last Name (Type or Print) _____ First Name (Type or Print) _____ Middle Name 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 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)

5 Date of Birth ____/____/____ **6** Day Time Phone Number (____) _____ **7** E-Mail Address (Optional) _____

8 Signature X _____ Please sign your name as it appears in the Poll Book. **9** Today's Date ____/____/____

OPTIONAL - ONLY COMPLETE SECTIONS 10 THROUGH 12 IF APPLICABLE

Voter Options to Automatically Receive Ballots in Future Elections

You may choose either option, both options, or none of the options. **YOU ARE NOT REQUIRED TO CHOOSE AN OPTION.** If you do not choose any option, you will only be sent the ballot for the election you chose in Section 1.

10 *A I wish to receive a Mail-In Ballot for all elections to be held during the **REMAINDER OF THIS CALENDAR YEAR.**

*B I wish to receive a Mail-In Ballot in **ALL FUTURE NOVEMBER GENERAL ELECTIONS**, until I request otherwise.

*Please Note: Your ballot can only be sent to the mailing address supplied on this application; if your address changes, you must notify the County Clerk in writing.

Assistor

Any person providing assistance to the voter in completing this application must complete this section.

11 Name of Assistor (Type or Print) _____ Signature of Assistor X _____ Date ____/____/____

Address _____ Apt. _____ Municipality (City/Town) _____ State _____ Zip _____

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.

Print Name of Authorized Messenger _____

Address of Messenger _____ Apt. _____ Municipality (City/Town) _____ State _____ Zip _____ Date of Birth ____/____/____

12 Signature of Voter X _____ Date ____/____/____

STOP Authorized Messenger must sign application and show photo ID in the presence of the County Clerk or County Clerk designee.

"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 X _____ Date ____/____/____

OFFICE USE ONLY

Voter Reg # _____

Muni Code # _____ Party _____

Ward _____ District _____