

OFFICE USE ONLY

VOTER NUMBER PARTY WARD DISTRICT BALLOT No.

CIVILIAN ABSENTEE BALLOT APPLICATION

PRINT OR TYPE NAME

DATE OF BIRTH

STREET ADDRESS OR RD#

MUNICIPALITY

ZIP CODE

PHONE

I hereby apply for an absentee ballot for the (check one):

- Primary General Municipal School Special Other (specify) to be held on (date)

ABSENTEE VOTER OPTIONS (Check any of the following that apply to you)

- A. I am permanently and totally disabled and wish to receive an absentee ballot for all elections to be held during the remainder of the calendar year.
B. I am not permanently and totally disabled, but wish to vote only by absentee ballot in a general election.

Mail my ballot to the following address (if different from above):

STREET ADDRESS

MUNICIPALITY

STATE

ZIP CODE

Sign your name as it appears in poll book

TODAY'S DATE

*Any person providing assistance to voter in completing this application must provide:

NAME (TYPE OR PRINT)

STREET ADDRESS

MUNICIPALITY

STATE

ZIP CODE

SIGNATURE OF ASSISTOR

DATE

*NO CANDIDATE IN THE ELECTION FOR WHICH THE VOTER IS REQUESTING AN ABSENTEE BALLOT CAN BE AN ASSISTOR OR AUTHORIZED MESSENGER.

ONLY if sick or confined, voter may apply for an absentee ballot by

*Authorized Messenger. Messenger shall be a family member or a registered voter of this County.

I designate (Name of Messenger) to be my authorized messenger.

(Signature of Voter)

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 absentee ballot directly to the voter and no other person, under penalty of law".

SIGNATURE OF MESSENGER

STREET ADDRESS

MUNICIPALITY

STATE

ZIP CODE

Name _____

Address _____

Municipality _____

State _____

Zip code _____

Affix

First Class

Postage

Here

VOTING INFORMATION:

1. You must be a registered voter in order to apply for an absentee ballot.
2. Once you apply for an absentee ballot, you will not be permitted to vote at your polling place in the same election.
3. Your ballot will be mailed to you on or after the 40th day prior to Election Day.
4. You will receive instructions with your ballot.
5. Your actual absentee ballot must be received by the County Board of Elections before close of polls on Election Day.
6. Do not submit more than one application for the same Election.
7. You must apply for an absentee ballot for each election, unless you designate otherwise under "OPTIONS"

PLEASE NOTE:

A voter may apply for an absentee ballot by mail up to 7 days prior to the election. He or she may also apply in person to the County Clerk until 3:00 P.M. the day before the election. Applications are to be returned to the County Clerk in the County of your last domicile in New Jersey.

Note also that permanently and totally disabled voters have the option of indicating on an application for an absentee ballot that they would prefer to receive an absentee ballot for each election that takes place during the remainder of the calendar year.

Voters who are not permanently and totally disabled now have the option of automatically receiving an absentee ballot application for any general election. If such voter no longer wants this option, the County Clerk's office must be notified.

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, if sick or confined, via an authorized messenger during County Clerk's office hours, but no later than 3:00 P.M. the day prior to the election.

CIVILIAN ABSENTEE BALLOT APPLICATION

**To: BRETT A. RADI
CLERK OF SOMERSET COUNTY
20 GROVE STREET
P.O. BOX 3000
SOMERVILLE, NJ 08876-1262**