

*** In order to receive a second ballot, you must submit this form:**

July 7th, 2020 -PRIMARY ELECTIONS

SECOND BALLOT REQUEST FORM

NAME: _____
(please print)

REGISTERED ADDRESS: _____
(please print)

**MAIL MY BALLOT
TO THE FOLLOWING ADDRESS** _____
(please print)

DATE OF BIRTH: _____
(please print)

SIGNATURE: _____

PHONE NUMBER: _____
(please print)

REASON FOR REQUEST

(please check applicable box)

1. I have not received my first ballot
2. I mistakenly threw away or misplaced my ballot
3. I accidentally made a mistake on my ballot and am requesting a second ballot.

Please contact the Essex County Clerks Office at 973-387-7314 with any questions or concerns. Once completed email this application to jferry@clerk.essexcountynj.org or fax to 973-621-5178.

