

COUNTY OF CAMDEN
OFFICE OF THE COUNTY CLERK

Joseph Ripa
County Clerk



Election Division
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electdiv@camdencounty.com

To the Clerk of Camden County:

I, the undersigned, request a replacement ballot for the following reason:

Para el Secretario del Condado de Camden:

Yo, el firmante de este documento, solicito una papeleta de reemplazo por la siguiente razón:

- ___ I did not receive a ballot Yo no recibí la papeleta
- ___ My ballot is torn, incorrectly marked or damaged Mí papeleta está destrozada, marcado incorrectamente o dañada
- ___ My ballot is misplaced Mí papeleta está extraviada
- ___ Other Otros _____

Name _____
Nombre

Address _____
Dirección

Date of Birth _____
Fecha de Nacimiento

X _____ / ____ / ____
Signature Firma Date Fecha

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
_____	_____	_____	_____	_____	____ / ____ / ____

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

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 _____ Date ____ / ____ / ____
X