

VOTE BY MAIL
NOTICE TO PERSONS WANTING MAIL-IN BALLOTS

If you are a qualified and registered voter of the State who wants to vote by mail in the **Special School Election in Netcong Borough**, to be held on **March 10, 2026**, the following applies:

You must complete the application form below and send it to the county clerk where you reside or write or apply in person to the county clerk where you reside to request a mail-in ballot.

The name, address, and signature of any person who has assisted you to complete the mail-in ballot application must be provided on the application, and you must sign and date the application.

No person may serve as an authorized messenger or bearer for more than three qualified voters in an election, but a person may serve as such for up to five qualified voters in an election if those voters are immediate family members residing in the same household as the messenger or bearer.

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 serve as an authorized messenger or bearer.

A person who applies for a mail-in ballot must submit his or her application at least seven days before the election, but such person may 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 by mail in all future elections will, after their initial request and without further action on their part, be provided with a mail-in ballot until the voter requests otherwise in writing, or beginning with the 2020 general election cycle, if the voter does not vote by mail in four consecutive years, then the voter shall no longer be furnished with a mail-in ballot for future elections and the voter shall be notified in writing of the change.

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

Dated: January 13, 2026

Ann F. Grossi, Esq.
Morris County Clerk
P. O. Box 315
Morristown, New Jersey 07963-0315
(973) 285-6066

VOTER INFORMATION

- Fill out application. Print and sign your name where indicated.
- Mail or Deliver application to the County Clerk. Do not fax or e-mail unless you are a Military or Overseas voter.
- You must be a registered voter in order to apply for a Mail-In Ballot.
- Once you apply for a Mail-In Ballot, you will not be permitted to vote by machine at your polling place in the same election.
- You will receive instructions with your ballot.
- If returning your Mail-In Ballot in person it must be received by the County Board of Elections before close of polls on Election Day. If returning your Mail-In Ballot by mail, it must be postmarked no later than Election Day and received by the County Board of Elections no later than 144 hours (6 days) after the time for the closing of the polls of the election.
- Do not submit more than one application for the same election.
- You must apply for a Mail-In Ballot for each election, unless you designate otherwise under Section 1.

PLEASE NOTE

A voter may apply for a Mail-In 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 P.M. the day before the election.

Voters now have an option of automatically receiving a Mail-In Ballot for all future elections. If such voter no longer wants this option, the County Clerk's office must be notified in writing.

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

APPLICATION FOR VOTE BY MAIL BALLOT

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

1	I hereby apply for a Mail-In Ballot for: (CHECK ONLY ONE)		MILITARY/OVERSEAS VOTER ONLY				
	<input type="checkbox"/> ALL FUTURE ELECTIONS, until I request otherwise in writing. Or for ONLY ONE of the following: <input type="checkbox"/> General (November) <input type="checkbox"/> Primary (June) <input type="checkbox"/> Municipal <input type="checkbox"/> School <input type="checkbox"/> Fire <input type="checkbox"/> Special _____ To be held on ____/____/_____ (Specify) (MM / DD / YYYY)		<input type="checkbox"/> A Member of the Uniformed Services or Merchant Marine on active duty, or an eligible spouse or dependent. <input type="checkbox"/> A U.S. Citizen residing outside the U.S. and I intend to return. <input type="checkbox"/> A U.S. Citizen residing outside the U.S. and I do not intend to return. <input type="checkbox"/> A U.S. Citizen residing outside the U.S. and I have never lived in the U.S.				
PLEASE NOTE: Your ballot can only be sent to the mailing address supplied on this application. If your mailing address changes, you must notify the County Clerk in writing.							
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:		Mail my ballot to the following address:				
	Street Address or RD# _____ Apt. _____ Municipality (City/Town) _____ State _____ Zip _____		<input type="checkbox"/> Same Address as Section 3 Please include _____ any PO Box, RD#, _____ State/Province, _____ Zip/Postal Code _____ & Country _____ (if outside US) _____				
5	Date of Birth (MM / DD / YYYY) ____/____/____		6	Day Time Phone Number () _____		7	E-Mail Address _____
PLEASE NOTE: This contact information will be used to contact you concerning the acceptance or rejection of your ballot and how you may cure a defect.							
8	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. X _____					9	Today's Date (MM / DD / YYYY) ____/____/____
OPTIONAL - ONLY COMPLETE SECTIONS 10 OR 11 IF APPLICABLE							
10	Assistor: Any person providing assistance to the voter in completing this application must complete this section.						
	Name of Assistor (Type or Print)		Signature of Assistor		Date (MM / DD / YYYY) ____/____/____		
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, except that an authorized messenger or bearer may serve as such for up to five qualified voters in an election if those voters are immediate family members residing in the same household as the messenger or bearer.							
I designate _____ to be my Authorized Messenger. Print Name of Authorized Messenger							
11	Address of Messenger _____		Apt. _____	Municipality (City/Town) _____	State _____	Zip _____	Date of Birth (MM / DD / YYYY) ____/____/____
	Signature of Voter _____		Date (MM / DD / YYYY) ____/____/____				
X _____							
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 _____ Date (MM / DD / YYYY) ____/____/____ X _____							
OFFICE USE ONLY Voter Reg # _____ Muni Code # _____ Party _____ Ward _____ District _____							