

WARREN COUNTY BOARD OF ELECTIONS

CUMMINS BUILDING  
202 MANSFIELD STREET  
BELVIDERE, NEW JERSEY 07823



PHONE AREA CODE 908  
475-6313  
475-6312  
475-6314  
FAX 475-6221

Name: \_\_\_\_\_

We received your voted ballot for the 2020 General Election. New Jersey Election Law requires us to compare the signature on your ballot envelope with the signatures in your voter registration record to verify your identity. **Unfortunately, your ballot SIGNATURE DOES NOT MATCH.** Thus, your ballot has been rejected.

You may correct this signature deficiency and have your ballot counted, by completing, signing, dating and returning the Cure Form below. A postage paid envelope addressed to the Board of Elections is enclosed for you to use to return the form. This form must be received by the Board of Elections in-person, by fax, by email, or by mail no later than 4:00 PM, November 18, 2020. If you fail to return the form, we will not count the ballot.

Please be advised that if you complete, sign, date, and return the Cure Form below, we will update your voter registration record to include this signature. If the ballot received in your name was not from you, please contact this office immediately.

Sincerely,

**Instructions:** Return this signed and dated form, with the required information or a copy of your identification, if applicable, in-person, or by mail, email or fax using the contact information below.

<b><u>Mail</u></b>	<b><u>Fax</u></b>	<b><u>Email</u></b>
Warren County Board of Elections 202 Mansfield St Belvidere, NJ 07823	(908) 475-6221	<a href="mailto:electionballots@co.warren.nj.us">electionballots@co.warren.nj.us</a>

Voter ID: \_\_\_\_\_ BATCH \_\_\_\_\_

I, \_\_\_\_\_, and hereby declare that I submitted my provisional or mail-in ballot. I am verifying my identity by (choose one):

\_\_\_\_\_ My Driver License Number is \_\_\_\_\_ or Motor Vehicle Commission Non-driver ID Number is \_\_\_\_\_; or,

\_\_\_\_\_ I do not have a Driver License Number or Motor Vehicle Commission Non-driver ID Number. The last four digits of my Social Security Number are \_\_\_\_\_; or,

\_\_\_\_\_ I do not have a Driver License, Motor Vehicle Commission Non-driver Identification, or Social Security Number, and am attaching a legible copy of a sample ballot which lists my name and address; an official federal, State, county or municipal document which lists my name and address; or a utility or telephone bill or tax or rent receipt which lists my name and address;

and, I wish to cure the signature deficiency in the record so my ballot can be cast and counted.

\_\_\_\_\_  
(CURE Signature of voter)

\_\_\_\_\_  
(Date)