



Mercer County Board of Elections
 930 Spruce Street
 Lawrence, NJ 08648
 Phone: (609)-989-6522 | Fax: (609)-278-2713 |
<http://nj.gov/counties/mercerc/commissions/elections/>

Official Use Only-Label

Dear Voter,

We received your voted ballot for the 2024 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 envelope did not have a signature OR we were unable to verify your signature with those on file.** 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 **4:30pm on Saturday, November 16th, 2024.** 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 at 609-989-6522.

Sincerely,
Mercer County Board of Elections

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.

Mail or In Person

Mercer County Board of Elections
 930 Spruce Street
 Lawrence, NJ 08648

Fax

609-278-2713

Email

CureLetters@MercerCounty.org

(DO NOT SEPARATE)

I, _____, hereby declare that I submitted my provisional or mail-in ballot. I am
(Print Name)
 verifying my identity by (choose one):

_____ My Driver License Number is _____ or;

_____ My 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 & address; an official federal, State, county or municipal document which lists my name & address; or a utility or telephone bill or tax or rent receipt which lists my name & address; and, I wish to cure the signature deficiency in the record so my ballot can be cast and counted.

(Signature of voter)

(Date)