

2024 Psychiatric Voter Registration Opportunity Response

Agency: _____

Mailing Address: _____

Prepared by: _____

Telephone: _____

Email: _____

Fax: _____

1st quarter	
From:	January 1, 2024
To:	March 31, 2024

Week Ending	Voter Opportunity Form Information					Completed Number of Registration Applications	Number of Voter Registration & Opportunity Forms Mailed to Applicants
	Yes	No	Refused to Sign RTS (Did not Return)	Already Registered	Total of Voter Opportunity Forms		
January 5, 2024							
January 12, 2024							
January 19, 2024							
January 26, 2024							
February 2, 2024							
February 9, 2024							
February 16, 2024							
February 23, 2024							
March 1, 2024							
March 8, 2024							
March 15, 2024							
March 22, 2024							
March 29, 2024							
Total							

Submit 1st Quarter Report during 1st week of April 2024 to:

Email: Sandra.lewis@sos.nj.gov

Mail: Division of Elections, P.O. Box 304, Trenton, NJ 08625-0304



State of New Jersey
Department of State
Division of Elections

NOTE: Retain copy of this report in your office files with copies of response form.

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