

①

Voters with
corresponding paperwork

Voter Profile

User Printed: BESOEAD2
Date: 03/30/2017

Voter Information:

Voter's Name: SEUNG H BAIK
Date of Birth: 10/25/1962
Voter ID: 152636382
Legacy ID:
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit: E2
Suffix A:
Suffix B:
Street Number: 2329
Street Name: HUDSON
TER
Address Line 2:
Address Line 3:
Municipality : FORT LEE
Postal City: FORT LEE
State: NJ
Zip: 07024

Party Information:

Current Party: Unaffiliated
Party Privilege Date:

Miscellaneous:

Gender: Female
Absentee Ballot Type: None
Registration Date: 07/01/2013
Registration Type: Agency with
Identification
Last Action Taken Date: 07/24/2013

Status Information:

Voting Privilege Date:
Current Status: Rejected
Date Last Voted:
Rejected Reason: Not a U.S Citizen/Checked off No to
U.S. Citizenship
Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Districts:

| | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|-----------------------|
| Ward | 00 | District | 15 | Congressional | 09 | Legislative 37 |
| Freeholder | | School | | Special | | Fire |

Previous Residence Addresses:

| Change Date | Street Number | Street Name | Address Line 2 | Address Line 3 | Unit | Municipality | State | Zip Code |
|-------------|---------------|-------------------------|----------------|----------------|------|--------------|------------|----------|
| 07/12/2013 | | 119 HARBOR VIEW TERRACE | | | | EDGEWATER | New Jersey | 07020 |

Election History:

No Records Found for the Election History

Previous Party:

No Records Found for the Previous Party

Previous Name:

No Records Found for the Previous Name

Registration History:

No Records Found for the Registration History

Main Menu:

Activities

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Compare MVC - Agency

BESOEAD2 / I

| MVC Voter | | | |
|-------------------------|--|----------------------------------|--|
| Name | SEUNG H BAIK | Date of Birth | 10/25/1962 |
| Residence Address | 2329 HUDSON TERRACE E2 FORT LEE NJ 07024-7964 | Mailing Address | |
| Driver's License Number | B01807016860621 | Original Driver's License Number | B01807016860621 |
| Card Number | | Previous DOB | 10/25/1962 |
| Previous Name | SEUNG H BAIK | Previous Address | 119 HARBOR VIEW TERRACE EDGEWATER NJ 07020-1186 |
| MVC Transaction Date | 07/01/2013 | | |

MVC Signature Date: 07/01/2013

Reject ☐ English: ☒ Spanish: Reject

No Card Issued

| SVRS Matched Voters | | | | | | | | | | |
|-------------------------------------|-----------|-------------|---------------|-------------------|---|-----------------|-------------------------|-----|-------------------|-----|
| Select | Voter Id | Name | Date of Birth | Registration Date | Residence Address | Mailing Address | Driver's License Number | SSN | Confidence Factor | Sta |
| <input checked="" type="checkbox"/> | 105271403 | SIMCHA BACK | 01/01/1800 | 09/20/1981 | 325 ELEVENTH ST, LAKEWOOD, NJ 08701 | | | | 25 % | |

* under Status Reason indicates voter has multiple status reasons

152636382



SEUNG H BAIK
2329 HUDSON TER Apt-Unit E2
FORT LEE NJ 07024

Note:

If status is blank, that implies the voter status is Active.

If Confidence Factor is 100 %, that implies Driver's License.

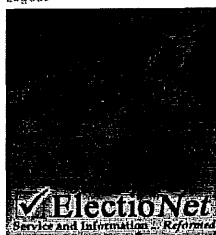
If Confidence Factor is 50 %, that implies Last Name, First

Last Name, First Name, First Letter of Middle Name and DOB (01/01/1800) matched statewide.

If Confidence Factor is 25 %, that implies Soundex of Last Name, Soundex of First Name, DOB (Including 01/01/1800) matched statewide.

Name matching process includes MVC previous names if there is a name change.


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New Jersey Voter Registration Application

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

| | | | | | | | |
|---|--|--|---|---|---|--|--|
| 1 Check boxes that apply: | | <input type="checkbox"/> New Registration | <input type="checkbox"/> Address Change | <input checked="" type="checkbox"/> Signature Update | <input type="checkbox"/> Political Party Affiliation or Non-affiliation Change | FOR OFFICIAL USE ONLY | |
| 2 Are you a U.S. Citizen? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If No, DO NOT complete this form) | | Will you be 18 years of age by the next election? <input type="checkbox"/> Yes <input type="checkbox"/> No (If No, DO NOT complete this form) | | | | Clerk Noted 7-24-13 | |
| 3 Last Name | First Name | Middle Name or Initial | Suffix (Jr., Sr., III) | Registration # | | | |
| BAIK | SEUNG | H | | 152636382 | | | |
| 4 Date of Birth | | 5 NJ Driver's License Number or MVC Non-driver ID Number | | | | Office Time Stamp | |
| 10 / 25 / 1962 | | # B0180 70168 60621 | | | | JUL 23 PM 10 | |
| | | If you DO NOT have a NJ Driver's License or MVC Non-Driver ID, provide the last 4 digits of your Social Security Number. | | | | SUPERINTENDENT OF ELECTIONS | |
| <input type="checkbox"/> "I swear or affirm that I DO NOT have a NJ Driver's License, MVC Non-driver ID or a Social Security Number." | | | | | | | |
| 6 Home Address (DO NOT use PO Box) | Apt | Municipality | County | State | Zip Code | | |
| 2329 Hudson Terrace | E2 | | Bergen | NJ | 07024 | | |
| 7 Mailing Address if different from above | Apt | Municipality | County | State | Zip Code | | |
| | | | | | | | |
| 8 Last Address Registered to Vote (DO NOT use PO Box) | Apt | Municipality | County | State | Zip Code | <input type="checkbox"/> by mail <input type="checkbox"/> in person | |
| 9 Former Name if Making Name Change | | a. Day Phone Number (Optional) | | | | | |
| | | b. E-Mail Address (Optional) | | | | | |
| 10 Do you wish to declare a political party affiliation? (Optional) | | <input type="checkbox"/> Yes, the party name is _____ <input type="checkbox"/> No, I do not wish to be affiliated with any political party. | | | | | |
| 11 Gender | Declaration - I swear or affirm that: <input checked="" type="checkbox"/> Female <input type="checkbox"/> Male • I am a U.S. Citizen • I live at the above address • I will be at least 18 years old on or before the next election | | | | | | |
| | | • I will have resided in the State and county at least 30 days before the next election • I am not on parole, probation or serving a sentence due to a conviction for an indictable offense under any federal or state laws | | | • I understand that any false or fraudulent registration may subject me to a fine of up to \$15,000, imprisonment up to 5 years, or both pursuant to R.S. 19:34-1 | | |
| Signature: Sign or mark and date on lines below | | | | If applicant is unable to complete this form, print the name and address of individual who completed this form. | | | |
|  | | | | Name _____ | | | |
| Date 7/18/13 | | | | Date _____ | | | |
| | | | | Address _____ | | | |

Important Instructions for sections 5, 6 and 10

152636382



SEUNG H BAIK
2329 HUDSON TER Apt-Unit E2
FORT LEE NJ 07024

I am registering to vote for the first time: If you do not have any of the provided cannot be verified, you will be asked to provide a COPY of a e and current address on it to avoid having to provide identification at the

leased by any governmental agency. Any person who uses such penalties.

providing a contact point or the location where you spend most of

10) You may declare a political affiliation or you may declare to be unaffiliated, regardless of any prior party affiliation. Completing section 10 is OPTIONAL and will not affect the acceptance of your voter registration application.

Need More Information? Check boxes below if you would like to receive more information about:

- ☐ voting by mail
☐ becoming a poll worker

- ☐ polling place accessibility
☐ voting if you have a disability, including visual impairment

- ☐ available election materials in this alternative language:

For further information visit www.NJElections.org or call toll-free 1-877-NJVOTER (1-877-658-6837)

Voter Profile

User Printed: BESOEAD2
Date: 03/30/2017

Voter Information:

Voter's Name: HALIL AGCAYAZI
Date of Birth: 02/13/1975
Voter ID: 152719714
Legacy ID:
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit:
Suffix A:
Suffix B:
Street Number: 210
Street Name: CASTLE COVE
TER
Address Line 2:
Address Line 3:
Municipality : EDGEWATER
Postal City: EDGEWATER
State: NJ
Zip: 07020

Party Information:

Current Party: Unaffiliated
Party Privilege Date:

Miscellaneous:

Gender: Not Entered
Absentee Ballot Type: None
Registration Date: 08/02/2013
Registration Type: Agency with
Identification
Last Action Taken Date: 01/28/2014

Status Information:

Voting Privilege Date:
Current Status: Rejected
Date Last Voted:
Rejected Reason: Not a U.S Citizen/Checked off No to
U.S. Citizenship
Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Districts:

| | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|-----------------------|
| Ward | 00 | District | 04 | Congressional | 09 | Legislative 32 |
| Freeholder | | School | | Special | | Fire |

Previous Residence Addresses:

| Change Date | Street Number | Street Name | Address Line 2 | Address Line 3 | Unit | Municipality | State | Zip Code |
|-------------|---------------|--------------------|----------------|----------------|------|--------------|------------|----------|
| 12/19/2013 | | 210 CASTLE TERRACE | | | | EDGEWATER | New Jersey | 07020 |

Election History:

No Records Found for the Election History

Previous Party:

No Records Found for the Previous Party

Previous Name:

No Records Found for the Previous Name

Registration History:

No Records Found for the Registration History

Main Menu:

Activities

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Voter Address Change
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Voters who have
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Verif. and Ack. Card Export
MVC Manual Update

Maintain Voter History

Maintain County Data

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Duplicate Voters

Batch Scanning

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Document Imaging

Handheld Scanning

Inquiries

Reports

Help

Logout

Compare MVC - Agency

BESOEAD2 / I

El Khatib

| MVC Voter | | | |
|-------------------------|--|----------------------------------|--|
| Name | HALIL AGCAYAZI | Date of Birth | 02/13/1975 |
| Residence Address | 210 CASTLE COVE TERRACE EDGEWATER NJ 07020-1179 | Mailing Address | |
| Driver's License Number | A30683110002752 | Original Driver's License Number | A30683110002752 |
| Card Number | | Previous DOB | 02/13/1975 |
| Previous Name | HALIL AGCAYAZI | Previous Address | 210 CASTLE TERRACE EDGEWATER NJ 07020 |
| MVC Transaction Date | 08/02/2013 | | |

MVC Signature Date: 08/02/2013

Reject ☐ English:☒ Spanish:

Reject

No Card Issued

| SVRS Matched Voters | | | | | | | | | | |
|---|----------|------|---------------|-------------------|-------------------|-----------------|-------------------------|-----|-------------------|-----|
| Select | Voter Id | Name | Date of Birth | Registration Date | Residence Address | Mailing Address | Driver's License Number | SSN | Confidence Factor | Sta |
| No Matching records Found. You can either choose to take No Action, Add or Reject this Motor Voter by clicking on the re buttons. | | | | | | | | | | |

* under Status Reason Indicates voter has multiple status reasons.

Note:

If status is blank, that implies the voter status is Active.

If Confidence Factor is 100 %, that implies Driver's License Number

If Confidence Factor is 50 %, that implies Last Name, First Name, DI

Last Name, First Name, First Letter of Middle Name and DOB (01/01

If Confidence Factor is 25 %, that implies Soundex of Last Name, So

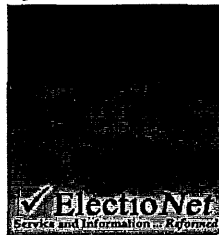
Name matching process Includes MVC previous names If there is a n

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152719714



HALIL AGCAYAZI
210 CASTLE COVE TER
EDGEWATER NJ 07020







New Jersey Voter Registration Application

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

| | | | | | |
|---|--|--|--|--|--|
| 1 Check boxes that apply: <input type="checkbox"/> New Registration <input type="checkbox"/> Name Change <input checked="" type="checkbox"/> Address Change <input checked="" type="checkbox"/> Signature Update <input type="checkbox"/> Political Party Affiliation or Non-affiliation Change | | | | FOR OFFICIAL USE ONLY | |
| 2 Are you a U.S. Citizen? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If No, DO NOT complete this form) | | Will you be 18 years of age by the next election? <input type="checkbox"/> Yes <input type="checkbox"/> No (If No, DO NOT complete this form) | | Clerk | |
| 3 Last Name AGCAYAZI | | First Name HALIL | | Middle Name or Initial | |
| | | | | Suffix (Jr., Sr., III) | |
| 4 Date of Birth | | | | Registration # 152719714 | |
| 5 NJ Driver's License Number or MVC Non-driver ID Number | | | | Office Time Stamp Attn: Dennis | |
| If you DO NOT have a NJ Driver's License or MVC Non-Driver ID, provide the last 4 digits of your Social Security Number. | | | | | |
| <input type="checkbox"/> "I swear or affirm that I DO NOT have a NJ Driver's License, MVC Non-driver ID or a Social Security Number." | | | | | |
| 6 Home | | 152719714 | | County State Zip Code | |
| 7 Mail | |  | | County State Zip Code | |
| 8 Last/ | | 210 CASTLE COVE TER EDGEWATER NJ 07020 | | County State Zip Code | |
| 9 Form | | per (Optional) | | | |
| D. E-Mail Address (Optional) | | | | | |
| 10 Do you wish to declare a political party affiliation? <input type="checkbox"/> Yes, the party name is _____ (Optional) <input checked="" type="checkbox"/> No, I do not wish to be affiliated with any political party. | | | | | |
| 11 Gender <input type="checkbox"/> Female <input checked="" type="checkbox"/> Male | | Declaration - I swear or affirm that: <ul style="list-style-type: none">• I am a U.S. Citizen• I live at the above address• I will be at least 18 years old on or before the next election <ul style="list-style-type: none">• I will have resided in the State and county at least 30 days before the next election• I am not on parole, probation or serving a sentence due to a conviction for an indictable offense under any federal or state laws <ul style="list-style-type: none">• I understand that any false or fraudulent registration may subject me to a fine of up to \$15,000, imprisonment up to 5 years, or both pursuant to R.S. 19:34-1 | | | |
| Signature: Sign or mark and date on lines below  | | | | If applicant is unable to complete this form, print the name and address of individual who completed this form. Name _____ Date _____ Address _____ | |

Important Instructions for sections 5, 6 and 10

- 5) Registrants who are submitting this form by mail and are registering to vote for the first time: If you do not have any of the information required by section 5, or the information you provide cannot be verified, you will be asked to provide a COPY of a current and valid photo ID, or a document with your name and current address on it to avoid having to provide identification at the polling place.

Note: ID Numbers are Confidential and will not be released by any governmental agency. Any person who uses such numbers illegally shall be subject to criminal penalties.

- 6) If you are homeless, you may complete section 6 by providing a contact point or the location where you spend most of your time.
- 10) You may declare a political affiliation or you may declare to be unaffiliated, regardless of any prior party affiliation. Completing section 10 is OPTIONAL and will not affect the acceptance of your voter registration application.

Need More Information? Check boxes below if you would like to receive more information about:

- | | | |
|---|---|---|
| <input type="checkbox"/> voting by mail | <input type="checkbox"/> polling place accessibility | <input type="checkbox"/> available election materials in this alternative language: |
| <input type="checkbox"/> becoming a poll worker | <input type="checkbox"/> voting if you have a disability, including visual impairment | |

For further information visit www.NJElections.org or call toll-free 1-877-NJVOTER (1-877-658-6837)

Voter Profile

User Printed: BESOEAD2
Date: 03/29/2017

Voter Information:

Voter's Name: FLORENCIO BAUTISTA
Date of Birth: 10/03/1962
Voter ID: 152376515
Legacy ID:
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit: 1B
Suffix A:
Suffix B:
Street Number: 15
Street Name: JAMES ST
Address Line 2:
Address Line 3:
Municipality : BERGENFIELD
Postal City: BERGENFIELD
State: NJ
Zip: 07621

Party Information:

Current Party: Unaffiliated
Party Privilege Date:

Miscellaneous:

Gender: Male
Absentee Ballot Type: None
Registration Date: 08/15/2012
Registration Type: Agency with Identification
Last Action Taken Date: 09/26/2012

Status Information:

Voting Privilege Date:
Current Status: Rejected
Date Last Voted:
Rejected Reason: Not a U.S Citizen/Checked off No to U.S. Citizenship
Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Districts:

| | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|-----------------------|
| Ward | 00 | District | 05 | Congressional | 05 | Legislative 38 |
| Freeholder | | School | | Special | | Fire |

Previous Residence Addresses:

| Change Date | Street Number | Street Name | Address Line 2 | Address Line 3 | Unit | Municipality | State | Zip Code |
|-------------|---------------|-------------|----------------|----------------|------|--------------|------------|----------|
| 09/26/2012 | | 15 JAMES ST | | | | BERGENFIELD | New Jersey | 07621 |

Election History:

No Records Found for the Election History

Previous Party:

No Records Found for the Previous Party

Previous Name:

No Records Found for the Previous Name

Registration History:

No Records Found for the Registration History

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Voter Change Audit

Voter Deletions

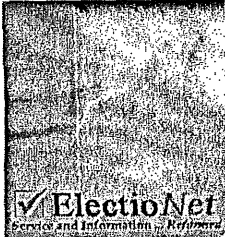
County Data

Purged Voters

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Help

Logout



Compare MVC - Agency

BESPTOGU / BERGEN

Add - 9/26/12

| MVC Voter | | | |
|-------------------------|---|----------------------------------|--|
| Name | FLORENCIO BAUTISTA | Date of Birth | 10/03/1962 |
| Residence Address | 15 JAMES ST APT 1B BERGENFIELD NJ 07621-2312 | Mailing Address | |
| Driver's License Number | B09012650010622 | Original Driver's License Number | B09012650010622 |
| Card Number | | Previous DOB | 10/03/1962 |
| Previous Name | FLORENCIO BAUTISTA | Previous Address | 15 JAMES ST BERGENFIELD NJ 07621-2312 |
| MVC Transaction Date | 08/15/2012 | | |

Reject ☐ English:☒ Spanish:

Reject

| SVRS Matched Voters | | | | | | | | | | |
|---|----------|------|---------------|-------------------|-------------------|-----------------|-------------------------|-----|-------------------|---------------|
| Select | Voter Id | Name | Date of Birth | Registration Date | Residence Address | Mailing Address | Driver's License Number | SSN | Confidence Factor | Status Reason |
| No Matching records Found. You can either choose to take No Action, Add or Reject this Motor Voter by clicking on the respective buttons. | | | | | | | | | | |

* under Status Reason Indicates voter has multiple status reasons.

152376515

FLORENCIO BAUTISTA
15 JAMES ST Apt-Unit 1B
BERGENFIELD NJ 07621

ched statewide.

matched statewide.

of First Name, DOB (including 01/01/1800) matched statewide.
ange.



BERGEN COUNTY
SUPERINTENDENT OF ELECTIONS
ONE BERGEN COUNTY PLAZA, ROOM 380
HACKENSACK, N. J. 07601
PHONE: (201) 336-6100
FAX: (201) 336-6111

PATRICIA DI COSTANZO
SUPERINTENDENT OF ELECTIONS
COMMISSIONER OF REGISTRATION

THERESA M. O'CONNOR
DEPUTY SUPERINTENDENT OF ELECTIONS
DEPUTY COMMISSIONER OF REGISTRATION

March 11, 2014

Florencio Bautista
15 James Street
#1B
Bergenfield, NJ 07621

DOB: 10/03/1962

Florencio Bautista registered to vote on August 15, 2012.

Mr. Bautista did not vote in any elections.

He registered at Motor Vehicle. When presented with the paperwork, Mr. Bautista signed it. However, he does not read English and did not realize he was signing for voter registration.

A certified copy of his voter profile, showing he was removed from the rolls, per his request, is enclosed.

If you have any questions, please do not hesitate to call this office.

Sincerely,

A handwritten signature in cursive script, reading "Patricia DiCostanzo".

Patricia DiCostanzo
Superintendent of Elections

Voter Profile

User Printed: BESDHERN
Date: 03/11/2014

Voter Information:

Voter's Name: FLORENCIO BAUTISTA
Date of Birth: 10/03/1962
Voter ID: 152376515
Legacy ID:
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit: 1B
Suffix A:
Suffix B:
Street Number: 15
Street Name: JAMES ST
Address Line 2:
Address Line 3:
Municipality : BERGENFIELD
Postal City: BERGENFIELD
State: NJ
Zip: 07621

Party Information:

Current Party: Unaffiliated
Party Privilege Date:

Miscellaneous:

Gender: Male
Absentee Ballot Type: None
Registration Date: 08/15/2012
Registration Type: Agency with Identification
Last Action Taken Date: 09/26/2012

Status Information:

Voting Privilege Date:
Current Status: Rejected
Date Last Voted:
Rejected Reason: Not a U.S Citizen/Checked off No to U.S. Citizenship
Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Districts:

| | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|-----------------------|
| Ward | 00 | District | 05 | Congressional | 05 | Legislative 38 |
| Freeholder | | School | | Special | | Fire |

Previous Residence Addresses:

| Change Date | Street Number | Street Name | Address Line 2 | Address Line 3 | Unit | Municipality | State | Zip Code |
|-------------|---------------|-------------|----------------|----------------|------|--------------|------------|----------|
| 09/26/2012 | | 15 JAMES ST | | | | BERGENFIELD | New Jersey | 07621 |

Election History:

No Records Found for the Election History

Previous Party:

No Records Found for the Previous Party

Previous Name:

No Records Found for the Previous Name

Registration History:

No Records Found for the Registration History



BERGEN COUNTY
SUPERINTENDENT OF ELECTIONS
ONE BERGEN COUNTY PLAZA, ROOM 380
HACKENSACK, N. J. 07601
PHONE: (201) 336-6100
FAX: (201) 336-6111

PATRICIA DI COSTANZO
SUPERINTENDENT OF ELECTIONS
COMMISSIONER OF REGISTRATION

THERESA M. O'CONNOR
DEPUTY SUPERINTENDENT OF ELECTIONS
DEPUTY COMMISSIONER OF REGISTRATION

152376515
FLORENCIO BAUTISTA
15 JAMES ST #1B
BERGENFIELD NJ 07621

February 27, 2014

Dear Voter:

It is important that you contact this office immediately regarding your Voter Registration.

Please call (201) 336-6101, Monday through Friday, between the hours of 8:30 AM and 4:30 PM; to set up an appointment to meet with the Superintendent of Elections.

Your prompt attention to this matter is greatly appreciated.

Sincerely,

A handwritten signature in black ink, appearing to read "Patricia DiCostanzo", with a long horizontal flourish extending to the right.

Patricia DiCostanzo
Superintendent of Elections

dh/

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Voter Registration

Voter Election History

Voter Change Audit

Voter Deletions

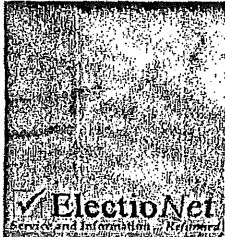
County Data

Purged Voters

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Compare MVC - Agency

BESPTOGU / BERGEN

Add - 9/26/12

| MVC Voter | | | |
|-------------------------|---|----------------------------------|--|
| Name | FLORENCIO BAUTISTA | Date of Birth | 10/03/1962 |
| Residence Address | 15 JAMES ST APT 1B BERGENFIELD NJ 07621-2312 | Mailing Address | |
| Driver's License Number | B09012650010622 | Original Driver's License Number | B09012650010622 |
| Card Number | | Previous DOB | 10/03/1962 |
| Previous Name | FLORENCIO BAUTISTA | Previous Address | 15 JAMES ST BERGENFIELD NJ 07621-2312 |
| MVC Transaction Date | 08/15/2012 | | |

Reject ☐ English:☒ Spanish:

Reject

| SVRS Matched Voters | | | | | | | | | | |
|---|----------|------|---------------|-------------------|-------------------|-----------------|-------------------------|-----|-------------------|---------------|
| Select | Voter Id | Name | Date of Birth | Registration Date | Residence Address | Mailing Address | Driver's License Number | SSN | Confidence Factor | Status Reason |
| No Matching records Found. You can either choose to take No Action, Add or Reject this Motor Voter by clicking on the respective buttons. | | | | | | | | | | |

* under Status Reason indicates voter has multiple status reasons.

152376515



FLORENCIO BAUTISTA
15 JAMES ST Apt-Unit 1B
BERGENFIELD NJ 07621

ched statewide.

matched statewide.

of First Name, DOB (including 01/01/1800) matched statewide.
ange.

Voter Profile

User Printed: BESOEAD2
Date: 03/29/2017

Voter Information:

Voter's Name: REGINALD BEAUHARNAIS
Date of Birth: 09/15/1966
Voter ID: 119676632
Legacy ID: J883816
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit:
Suffix A:
Suffix B:
Street Number: 440
Street Name: DEWEY AVE
Address Line 2:
Address Line 3:
Municipality : SADDLE BROOK
Postal City: SADDLE BROOK
State: NJ
Zip: 07663

Party Information:

Current Party: Democratic*
Party Privilege Date: 06/08/2010

Miscellaneous:

Gender: Not Entered
Absentee Ballot Type: None
Registration Date: 04/20/2001
Registration Type: Mail-in without Identification
Last Action Taken Date: 03/22/2013

Status Information:

Voting Privilege Date: 05/19/2001
Current Status: Deleted
Date Last Voted: 11/06/2012
Deleted Date: 03/22/2013
Deleted Reason: Administrative Action
Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Districts:

| | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|-----------------------|
| Ward | 00 | District | 05 | Congressional | 09 | Legislative 38 |
| Freeholder | | School | | Special | | Fire |

Previous Residence Addresses:

No Records Found for the Previous Residence Addresses

Election History:

| Election Date & Name | Election Type | Election Code | Ballot Type | County Voted In | Municipality Voted In | Party Affiliation | Memo User | Date Scanned | Date Counted | Ballot Status |
|--------------------------------|---------------|-----------------|-------------|-----------------|-----------------------|-------------------|-----------|--------------|--------------|---------------|
| 11/06/2012- GENERAL ELECTION | General | GE 2012 | Machine | BERGEN | SADDLE BROOK | | BESOEADM | 11/29/2012 | 11/06/2012 | |
| 06/08/2010- STATE PRIMARY 2010 | Primary | STATE PE 060810 | Machine | BERGEN | SADDLE BROOK | Democratic* | BESOEAD2 | 06/21/2010 | 06/08/2010 | |

Previous Party:

| | | |
|---------------------|-----------------------------|-------------------|
| Date Changed | Party Privilege Date | Party Name |
| 06/08/2010 | 06/08/2010 | Unaffiliated |

Previous Name:

No Records Found for the Previous Name

Registration History:

No Records Found for the Registration History

SADDLE BROOK NJ 07663

Memo:

NOT A US CITIZEN AS PER LETTER FROM VOTER.-
03/22/2013, BESLAPRI

[Previous](#)

BERGEN County Admin Message --> Have a nice day.

©2004 - 2005 PCC Technology Group. All rights reserved.

1.9.0

C 04-20-01BBS
5/10/01

CHANGE IN

Permanent Registration J 883816
(ORIGINAL)



State of New Jersey
County Commissioners of Registration

82

Voter Registration Application

8438-01

| | | | |
|---|---|-------------------------------|--|
| 1 | Check one: <input checked="" type="checkbox"/> New Registration <input type="checkbox"/> Address Change <input type="checkbox"/> Name Change | | |
| 2 | Last Name <i>Beauharnais</i> | First Name <i>Reginald</i> | Middle Initial Jr. Sr. II III |
| 3 | Street Address Where You Live <i>440 Dewey Ave</i> | | Apt. # |
| 4 | City or Town <i>Saddle Brook NJ</i> | County <i>Bergen</i> | Zip Code <i>07663</i> |
| 5 | Address Where You Get Your Mail (if different from above) | | |
| 6 | Date of Birth - Month, Day, Year <i>09/15/66</i> | 7 | Telephone Number (optional) <i>201-556-1381</i> |
| 8 | Name And Address Of Your Last Voter Registration | | |

119676632



REGINALD BEAUHARNAIS
440 DEWEY AVE
SADDLE BROOK NJ 07663

action
due to
deral

ration

may subject me to a fine up to \$1,000, imprisonment
up to 5 years or both pursuant to R.S. 19:34-1.

[Redacted Signature]

3/26/01
Date

Name

| |
|---|
| County |
| For Office Use Only |
| Clerk <i>4/17/01</i> |
| Registration No. |
| Office Time Stamp <i>APR 10 11 40 AM '01</i> |

March 22 2013

Here By asking To Remove my
Name Reginald Beauharnais from
The Voting Registry AS I'm not
a U.S Citizen.

Reginald Beauharnais

440 Dewey Ave
Saddle Brook NJ 07663

Tel: 201-556-5553

119676632



REGINALD BEAUHARNAIS
440 DEWEY AVE
SADDLE BROOK NJ 07663

2013 MAR 22 PM 1 44

SUPERINTENDENT
OF ELECTIONS
BERGEN COUNTY, N.J.

BERGENFIELD: 5



BOARD

GENERAL ELECTION

NOVEMBER 5, 2013

A THRU K

Carlton Bunch - Moving - Dec 1-2013 -
12 Warren St - Carter - NJ. 07008
~~4119712216~~

Florencio Bautista - JV copy to LISA
He is not a Citizen #152

Arielle M Dineen: Get married change he last name;
151868721 letter send out x H. phone 68.

all/ya

Reg

Voter Profile

User Printed: BESOEAD2
Date: 03/30/2017

Voter Information:

Voter's Name: MARIO BUSTILLO
Date of Birth: 12/08/1959
Voter ID: 152223141
Legacy ID:
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit:
Suffix A: E
Suffix B:
Street Number: 2047
Street Name: EDWIN AVE
Address Line 2:
Address Line 3:
Municipality : FORT LEE
Postal City: FORT LEE
State: NJ
Zip: 07024

Party Information:

Current Party: Unaffiliated
Party Privilege Date:

Miscellaneous:

Gender: Not Entered
Absentee Ballot Type: None
Registration Date: 04/10/2012
Registration Type: Mail-in without Identification
Last Action Taken Date: 05/02/2012

Status Information:

Voting Privilege Date:
Current Status: Rejected
Date Last Voted:
Rejected Reason: Not a U.S Citizen/Checked off No to U.S. Citizenship
Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Districts:

| | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|-----------------------|
| Ward | 00 | District | 11 | Congressional | 09 | Legislative 37 |
| Freeholder | | School | | Special | | Fire |

Previous Residence Addresses:

No Records Found for the Previous Residence Addresses

Election History:

No Records Found for the Election History

Previous Party:

No Records Found for the Previous Party

Previous Name:

No Records Found for the Previous Name

Registration History:

No Records Found for the Registration History



New Jersey Voter Registration Application

76

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

sent letter's & DOB

1 Check boxes that apply: ☒ New Registration ☐ Name Change ☐ Address Change ☐ Signature Update ☐ Political Party Affiliation or Non-affiliation Change

2 Are you a U.S. Citizen? ☒ Yes ☐ No (If No, DO NOT complete this form) Will you be 18 years of age by the next election? ☒ Yes ☐ No (If No, DO NOT complete this form)

3 Last Name: BUSTILLO First Name: MARIO Middle Name or Initial: H Suffix (Jr., Sr., III):

4 Date of Birth: 11/16

5 NJ Driver's License Number or MVC Non-driver ID Number: If you DO NOT have a NJ Driver's License or MVC Non-Driver ID, provide the last 4 digits of your Social Security Number.

☐ "I swear or affirm that I DO NOT have a NJ Driver's License, MVC Non-driver ID or a Social Security Number."

6 Home Address (DO NOT use PO Box): Apt. Municipality County State Zip Code
2047 E EDWIN AVE. Apt. FORT LEE Bergen NJ 07024

7 Mailing Address if different from above: Apt. Municipality County State Zip Code

8 Last Address Registered to Vote (DO NOT use PO Box): Apt. Municipality County State Zip Code

9 Former Name if Making Name Change: a. Day Phone Number (Optional): 201-747-0573 b. E-Mail Address (Optional):

10 Do you wish to declare a political party affiliation? ☐ Yes, the party name is ☒ No, I do not wish to be affiliated with any political party.

11 Gender: ☐ Female ☒ Male Declaration - I swear or affirm that:
☒ I am a U.S. Citizen
☒ I live at the above address
☒ I will be at least 18 years old on or before the next election
☐ I will have resided in the State and county at least 30 days before the next election
☐ I am not on parole, probation or serving a sentence due to a conviction for an indictable offense under any federal or state laws
☐ I understand that any false or fraudulent registration may subject me to a fine of up to \$15,000, imprisonment up to 5 years or both pursuant to R.S. 19:34-1

FOR OFFICIAL
USE ONLY

Clerk

4/16/12

Registration #

Office Time Stamp

2012 APR 16

SUPERINTENDENT
OF ELECTIONS
BERGEN COUNTY, N.J.

☐ by mail

☒ in person

(46)

Signature: Sign or mark and date on lines below

If applicant is unable to complete this form, print the name and address of individual who completed this form

Name

Date

Address

Date 1-9-12

5, 6 and 10

When registering to vote for the first time: If you do not have any of the above information, you will be asked to provide a COPY of a current address on it to avoid having to provide identification at the time of registration.

Not used by any governmental agency. Any person who uses such information for any purpose other than voter registration is guilty of a crime.

providing a contact point or the location where you spend most of

your time.

10) You may declare a political affiliation or you may declare to be unaffiliated, regardless of any prior party affiliation. Completing section 10 is OPTIONAL and will not affect the acceptance of your voter registration application.

Need More Information? Check boxes below if you would like to receive more information about:

☐ voting by mail
☐ becoming a poll worker

☐ polling place accessibility
☐ voting if you have a disability, including visual impairment

☐ available election materials in this alternative language.

For further information visit www.NJElections.org or call toll-free 1-877-NJVOTER (1-877-658-6837)

PATRICIA DICOSTANZO
BERGEN COUNTY
SUPERINTENDENT OF ELECTIONS
1 BERGEN COUNTY PLAZA ROOM 380
HACKENSACK NJ 07601
PHONE: 201-336-6100
FAX: 201-336-6111

MARIO BUSTILLO
2047 E EDWIN AVE
FORT LEE NJ 07024

04/16/2012

Voter ID# 152223141



Dear Mario,

This office is in receipt of your voter registration application. It cannot be completely processed for the following reason(s).

• Birth date is missing _____

☐ I AM A US CITIZEN

• Check off box for U.S. citizens is not completed

☒ I AM NOT A US CITIZEN

Please completely fill out the enclosed (postage paid) voter registration form, including your signature, and return to our office by mail or in person.

If you have any questions feel free to contact our office.

Thank you for your help in resolving this matter.

Sincerely Yours,

Patricia DiCOSTANZO

PATRICIA DICOSTANZO
SUPERINTENDENT OF ELECTIONS

2012 APR 21
A 10:21
SUPERINTENDENT
OF ELECTIONS
BERGEN COUNTY, N.J.

Voter Profile

User Printed: BESOEAD2
Date: 03/29/2017

Voter Information:

Voter's Name: NELSON CARDONA
Date of Birth: 02/28/1959
Voter ID: 151763330
Legacy ID:
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit:
Suffix A:
Suffix B:
Street Number: 225
Street Name: W BROAD ST
Address Line 2:
Address Line 3:
Municipality : BERGENFIELD
Postal City: BERGENFIELD
State: NJ
Zip: 07621

Party Information:

Current Party: Unaffiliated
Party Privilege Date: 04/14/2011

Miscellaneous:

Gender: Not Entered
Absentee Ballot Type: None
Registration Date: 03/24/2011
Registration Type: Mail-in with Identification
Last Action Taken Date: 04/07/2011

Status Information:

Voting Privilege Date: 04/14/2011
Current Status: Deleted
Date Last Voted:
Deleted Date: 04/07/2011
Deleted Reason: Administrative Action
Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Districts:

| | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|-----------------------|
| Ward | 00 | District | 13 | Congressional | 05 | Legislative 38 |
| Freeholder | | School | | Special | | Fire |

Previous Residence Addresses:

No Records Found for the Previous Residence Addresses

Election History:

No Records Found for the Election History

Previous Party:

No Records Found for the Previous Party

Previous Name:

No Records Found for the Previous Name

Registration History:

No Records Found for the Registration History

Miscellaneous Memo

**BESOEAD2 /
BERGEN**

Memo :

Not A US Citizen

Close



Nueva Jersey

Solicitud de Inscripción de Votantes

Escriba claramente con tinta. Se requiere toda la información a menos que esté marcada como opcional.

| | | | | | | |
|---|--|--|------------------------------|---|--------------|---|
| 1 Marque las casillas que correspondan: <input type="checkbox"/> Nueva inscripción <input type="checkbox"/> Cambio de dirección <input type="checkbox"/> Afiliación a partido político <input type="checkbox"/> Cambio de nombre <input type="checkbox"/> Actualización de la firma <input type="checkbox"/> o Cambio de sin afiliación | | | | | | Solo para uso oficial Secretario 3/28/11 NJS Núm. de inscripción NJS-VR Timbre de hora de oficina MAR 21 11:01 SUPERINTENDENT OF ELECTIONS BERGEN COUNTY, N.J. por correo <input type="checkbox"/> en persona <input type="checkbox"/> |
| 2 ¿Es ciudadano estadounidense? <input type="checkbox"/> SI <input type="checkbox"/> No (Si no lo es, NO complete este formulario) | | ¿Tendrá 18 años de edad para la próxima elección? <input type="checkbox"/> SI <input type="checkbox"/> No (Si no es así, NO complete este formulario) | | | | |
| 3 Apellido CARDONA | | Primer Nombre Nelson | | Segundo nombre o inicial Sufijo (Jr., Sr., III) | | |
| 4 Fecha de nacimiento Mes 12 Día 28 Año 1954 | | | | | | |
| 5 Número de licencia de conducir de NJ o Número de identificación de MVC de no conductor Si NO tiene una Licencia de conducir de NJ o Identificación de MVC de no conductor, indique los últimos 4 dígitos de su Número de Seguro Social. <input type="checkbox"/> *Juro o afirmo que NO tengo una Licencia de conducir de NJ, Identificación de MVC como no conductor ni Número de Seguro Social.* | | | | | | |
| 6 Dirección del domicilio (NO use apartados postales) 225 W Broad St | | Apt. | Municipalidad Bergenfield | Condado Bergen | Estado NJ | Código postal 07621 |
| 7 Dirección postal si es diferente de la anterior Same | | Apt. | Municipalidad Same | Condado Same | Estado NJ | Código postal Same |
| 8 Última dirección registrada para votar (NO use apartados postales) | | Apt. | Municipalidad | Condado | Estado | Código postal |
| 9 Nombre anterior si hace un cambio de nombre N/A | | | | Número de teléfono durante el día (Opcional) 201-338-2313 | | |
| 10 ¿Desea declarar una afiliación a un partido político? <input type="checkbox"/> SI, el nombre del partido es <input type="checkbox"/> No, no deseo afiliarme a ningún partido político. (Opcional) | | | | | | |
| 11 Sexo <input type="checkbox"/> Femenino <input checked="" type="checkbox"/> Masculino | | Declaración - Juro y afirmo que: • Soy ciudadano de los Estados Unidos. • Vivo en la dirección indicada. • Tendré por lo menos 18 años de edad para la próxima elección o antes. • Habré residido en el Estado y condado al menos 30 días antes de la próxima elección. • No estoy bajo fianza ni cumpliendo una sentencia debido a una condena por un delito penado por ninguna ley federal ni estatal. • Entiendo que cualquier inscripción falsa o fraudulenta pueda someterme a una multa de hasta \$15,000, pena de cárcel hasta 5 años o las dos cosas, conforme a R.S. 19:34-1. | | | | |
| Firma: Firme o marque y fecha en la línea a continuación | | | | Si el solicitante no puede completar este formulario, escriba el nombre y la dirección de la persona que completó este formulario. Nombre _____ Fecha _____ Dirección _____ | | |
| Fecha 3-17-11 | | | | | | |

In:

5

151763330

NELSON CARDONA
225 W BROAD ST
BERGENFIELD NJ 07621

6

Secciones 5, 6 y 10

Inscriban para votar por primera vez: Si no tiene ninguna de la información que indique, se le pedirá presentar una COPIA de su nombre y dirección actual incluida, para evitar tener que

comunicar a ninguna entidad gubernamental. Cualquier persona que use tales.

En 6 dando un punto de contacto o la ubicación donde pasa la

- 10) Puede declarar una afiliación política o puede declarar no estar afiliado, sin importar ninguna afiliación anterior a un partido. Es OPCIONAL completar la sección 10 y no afectará la aceptación de su solicitud de inscripción de votante. Un votante puede afiliarse a uno de los partidos siguientes: Democratic (Demócrata), Republican (Republicano), Green (Verde), Libertarian (Libertario), Natural Law (Ley Natural), Reform (Reforma) o United States Constitution (Constitución de los Estados Unidos).

¿Necesita más información? Marque las casillas a continuación si desea recibir más información acerca de:
☐ votante ausente ☐ accesibilidad de lugar de votación ☐ materiales electorales disponibles en este otro idioma
☐ trabaja en los lugares de votación ☐ votar si tiene alguna discapacidad, incluyendo problemas de visión

Para obtener más información visite www.NJElections.org o llame a la línea gratis 1-877-NUVOTER (1-877-658-8837)



BERGEN COUNTY
SUPERINTENDENT OF ELECTIONS
ONE BERGEN COUNTY PLAZA, ROOM 380
HACKENSACK, N. J. 07601
PHONE: (201) 336-6100
FAX: (201) 336-6111

PA
SUPE
COMM

151763330



NELSON CARDONA
225 W BROAD ST
BERGENFIELD NJ 07621

THERESA M. O'CONNOR
DEPUTY SUPERINTENDENT OF ELECTIONS
DEPUTY COMMISSIONER OF REGISTRATION

*deleted/Kathy
4/7/11*

Re: Voter Registration Status

Your voter registration application cannot be accepted. You must be an **American Citizen** to vote on election day.

Complete the following for our records.

Please mark with an X ☐ I am a US Citizen ☐ YO SOY CIUDADANO
 ☒ I am NOT a US Citizen ☐ NO SOY CIUDADANO

*Please sign your name

Nelson Cardona

Print your name

Return in enclosed envelope.

Sincerely,
Patricia DiCostanzo
Superintendent of Elections

/p

2011 APR 16 11:11

SUPERINTENDENT
OF ELECTIONS
BERGEN COUNTY, N.J.

Voter Profile

User Printed: BESPTOGU

Date: 03/30/2017

Voter Information:

Voter's Name: ALAN O CAVERO-PUNTRIANO

Date of Birth: 09/01/1983

Voter ID: 152811676

Legacy ID:

Archived Legacy ID:

Residence Address:

County: BERGEN

Unit:

Suffix A:

Suffix B:

Street Number: 82

Street

Name: WESTERVELT PL

Address Line 2:

Address Line 3:

Municipality : LODI

Postal City: LODI

State: NJ

Zip: 07644

Party Information:

Current Party: Unaffiliated

Party Privilege Date:

Miscellaneous:

Gender: Not Entered

Absentee Ballot Type: None

Registration Date: 01/15/2014

Registration Type: Agency with
Identification

Last Action Taken Date: 08/06/2014

Status Information:

Voting Privilege Date:

Current Status: Rejected

Date Last Voted:

Rejected Reason: Not a U.S Citizen/Checked off No to
U.S. Citizenship

Poll Worker Status:

Mailing Address:

Street Number:

Suffix A:

Suffix B:

Street Name/P.O. Box:

Unit:

Address Line 2:

Address Line 3:

City:

State:

Zip Code:

Country:

Inactive Confirmation Address:

Street Number:

Suffix A:

Suffix B:

Street Name/P.O. Box:

Unit:

Address Line 2:

Address Line 3:

City:

State:

Zip Code:

Country:

Districts:

| | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|-----------------------|
| Ward | 00 | District | 03 | Congressional | 05 | Legislative 38 |
| Freeholder | | School | | Special | | Fire |

Previous Residence Addresses:

| Change Date | Street Number | Street Name | Address Line 2 | Address Line 3 | Unit | Municipality | State | Zip Code |
|-------------|---------------|-----------------|----------------|----------------|------|--------------|------------|----------|
| 08/06/2014 | | 32 BOYD ST FL 3 | | | | LODI | New Jersey | 07644 |

Election History:

No Records Found for the Election History

Previous Party:

No Records Found for the Previous Party

Previous Name:

No Records Found for the Previous Name

Registration History:

No Records Found for the Registration History

Main Menu:

Activities

Voter Registration

Add/Change Voter
 Voter With No DOB
 Voter Address Change
 Confirmation
 Voter Address Change
 Confirmation Export
MVC - Agency
 MVC File Online Voter
 Voters who have
 Verification / Postal Notice
 Verif. and Ack. Card Export
 MVC Manual Update

Maintain Voter History

Maintain County Data

Elections

System

Poll Book Printing Schedule

Duplicate Voters

Batch Scanning

Messaging

MVC DL Search

Backend Reporting

Document Imaging

Handheld Scanning

Inquiries

Reports

Help

Logout

Compare MVC - Agency

E/Kathy (NS)

| MVC Voter | | | | |
|-------------------------|---|--|----------------------------------|---------------------------------------|
| Name | ALAN O CAVERO-PUNTRIANO | | Date of Birth | 09/01/1983 |
| Residence Address | 82 WESTERVELT PLACE LODI NJ 07644-1008 | | Mailing Address | |
| Driver's License Number | C09100157609832 | | Original Driver's License Number | C09100157609832 |
| Card Number | | | Previous DOB | 09/01/1983 |
| Previous Name | ALAN O CAVERO-PUNTRIANO | | Previous Address | 32 BOYD ST FL 3 LODI NJ 07644-2406 |
| MVC Transaction Date | 01/15/2014 | | | |

MVC Signature Date: 01/15/2014

Reject ☐ English:

☒ Spanish:

Reject

No Card Issued

Reject Signature from Importing

| SVRS Matched Voters | | | | | | | | | | | |
|---|----------|------|---------------|-------------------|-------------------|-----------------|-------------------------|-----|-------------------|--------|---------------|
| Select | Voter Id | Name | Date of Birth | Registration Date | Residence Address | Mailing Address | Driver's License Number | SSN | Confidence Factor | Status | Status Reason |
| No Matching records Found. You can either choose to take No Action, Add or Reject this Motor Voter by clicking on the respective buttons. | | | | | | | | | | | |

* under Status Reason indicates voter has multiple status reasons.

Select Add Back No Action Required

Note:

If status is blank, that implies the voter status is Active.
 If Confidence Factor is 100 %, that implies Driver's License Number is match
 If Confidence Factor is 50 %, that implies Last Name, First Name, DOB (or)
 Last Name, First Name, First Letter of Middle Name and DOB (01/01/1800)
 If Confidence Factor is 25 %, that implies Soundex of Last Name, Soundex
 Name matching process includes MVC previous names if there is a name change

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152811676



ALAN O CAVERO-PUNTRIANO
 82 WESTERVELT PL
 LODI NJ 07644





New Jersey Voter Registration Application

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

| | | | | | | | |
|--|--|---|--------------|--|-------|--|--|
| 1 Check boxes that apply: <input type="checkbox"/> New Registration <input type="checkbox"/> Address Change <input checked="" type="checkbox"/> Signature Update <input type="checkbox"/> Political Party Affiliation or Non-affiliation Change | | | | | | FOR OFFICIAL USE ONLY Clerk <u>Cth. Kathy</u> Registration # <u>152811676</u> Office Time Stamp SUPERINTENDENT OF ELECTIONS BERGEN COUNTY, NJ by mail in person | |
| 2 Are you a U.S. Citizen? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If No, DO NOT complete this form) | | Will you be 18 years of age by the next election? <input type="checkbox"/> Yes <input type="checkbox"/> No (If No, DO NOT complete this form) | | | | | |
| 3 Last Name <u>CAVERO-PUNTRIANO</u> | | First Name <u>Alan</u> | | Middle Name or Initial | | Suffix (Jr., Sr., III) | |
| 4 Date of Birth | | | | | | | |
| 5 NJ Driver's License Number or MVC Non-driver ID Number If you DO NOT have a NJ Driver's License or MVC Non-Driver ID, provide the last 4 digits of your Social Security Number. <input type="checkbox"/> "I swear or affirm that I DO NOT have a NJ Driver's License, MVC Non-driver ID or a Social Security Number." | | | | | | | |
| 6 Home Address (DO NOT use PO Box) | | Apt. | Municipality | County | State | Zip Code | |
| 7 Mailing Address if different from above | | Apt. | Municipality | County | State | Zip Code | |
| 8 Last Address Registered to Vote (DO NOT use PO Box) | | Apt. | Municipality | County | State | Zip Code | |
| 9 Former Name if Making Name Change | | | | a. Day Phone Number (Optional) _____ b. E-Mail Address (Optional) _____ | | | |
| 10 Do you wish to declare a political party affiliation? <input type="checkbox"/> Yes, the party name is _____ (Optional) <input checked="" type="checkbox"/> No, I do not wish to be affiliated with any political party. | | | | | | | |
| 11 Gender <input type="checkbox"/> Female <input checked="" type="checkbox"/> Male | | Declaration - I swear or affirm that: <input checked="" type="checkbox"/> I am a U.S. Citizen <input checked="" type="checkbox"/> I live at the above address <input checked="" type="checkbox"/> I will be at least 18 years old on or before the next election <input type="checkbox"/> I will have resided in the State and county at least 30 days before the next election <input type="checkbox"/> I am not on parole, probation or serving a sentence due to a conviction for an indictable offense under any federal or state laws <input type="checkbox"/> I understand that any false or fraudulent registration may subject me to a fine of up to \$15,000, imprisonment up to 5 years, or both pursuant to R.S. 19:34-1 | | | | | |
| Signature: Sign or mark and date on lines below <u>[Signature]</u> Date <u>08-09-14</u> | | | | If applicant is unable to complete this form, print the name and address of individual who completed this form. Name <u>ALAN CAVERO</u> Date <u>08-09-2014</u> Address <u>82 WESTERVELT PLACE</u> <u>LODI NJ 07644</u> | | | |

Important Instructions for sections 5, 6 and 10

152811676



ALAN O CAVERO-PUNTRIANO
82 WESTERVELT PL
LODI NJ 07644

registering to vote for the first time: If you do not have any of the
ide cannot be verified, you will be asked to provide a COPY of a
d current address on it to avoid having to provide identification at the

sed by any governmental agency. Any person who uses such
alties.

viding a contact point or the location where you spend most of

10) You may declare a political affiliation or you may declare to be unaffiliated, regardless of any prior party affiliation. Completing section 10 is OPTIONAL and will not affect the acceptance of your voter registration application.

Need More Information? Check boxes below if you would like to receive more information about:

☐ voting by mail
☐ becoming a poll worker

☐ polling place accessibility
☐ voting if you have a disability,
 including visual impairment

☐ available election materials in
 this alternative language:

For further information visit www.NJElections.org or call toll-free 1-877-NJVOTER (1-877-658-6837)

Voter Profile

User Printed: BESPTOGU
Date: 03/30/2017

Voter Information:

Voter's Name: JIHAENG JI CHO
Date of Birth: 04/25/1940
Voter ID: 152346782
Legacy ID:
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit: B7
Suffix A:
Suffix B:
Street Number: 22
Street Name: HENRY AVE
Address Line 2:
Address Line 3:
Municipality : PALISADES PARK
Postal City: PALISADES PARK
State: NJ
Zip: 07650

Party Information:

Current Party: Unaffiliated
Party Privilege Date:

Miscellaneous:

Gender: Not Entered
Absentee Ballot Type: None
Registration Date: 09/11/2012
Registration Type: Mail-in without Identification
Last Action Taken Date: 10/23/2012

Status Information:

Voting Privilege Date:
Current Status: Rejected
Date Last Voted:
Rejected Reason: Not a U.S Citizen/Checked off No to U.S. Citizenship
Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Districts:

| | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|-----------------------|
| Ward | 00 | District | 03 | Congressional | 09 | Legislative 37 |
| Freeholder | | School | | Special | | Fire |

Previous Residence Addresses:

No Records Found for the Previous Residence Addresses

Election History:

No Records Found for the Election History

Previous Party:

No Records Found for the Previous Party

Previous Name:

No Records Found for the Previous Name

Registration History:

No Records Found for the Registration History



뉴저지 유권자 등록 신청서

76

잉크펜을 이용하여 인쇄체로 명확하게 작성하십시오. 선택 항목이 아닌 이상 모든 항목을 작성해야 합니다.

| | | |
|--|---|--|
| 1 해당 사항에 체크 표시하십시오: <input type="checkbox"/> 신규 등록 <input type="checkbox"/> 주소 변경 <input type="checkbox"/> 소속 정당 또는 무소속으로 변경 | | 사무국 작성란 |
| 2 미국 시민입니까? <input checked="" type="checkbox"/> 예 <input type="checkbox"/> 아니오 (아닌 경우, 이 양식을 작성하지 마십시오) | | 선거 9.11.12 |
| 3 성 CHO 이름 Ji Haeng 중간 이름 또는 약자 Ji 호칭(Jr., Sr., III) | | 등록 # MA |
| 4 생년월일 1940. 4. 25 | | 사무국 시간 스탬프 |
| 5 뉴저지 운전면허번호 또는 MVC 비운전자 신분증 번호 <input type="checkbox"/> "나는 뉴저지 운전면허증, MVC 비운전자 신분증 또는 사회보장번호(SSN)가 없음을 선택 또는 확인합니다." | | |
| 6 자택 주소(사서함(P.O. Box)은 사용하지 마시오) 22 Henry Ave | Apt B#7 시/타운 Palisades Park 카운티 NJ 주 우편번호 07650 | |
| 7 우편용 주소(상기 주소와 다른 경우 기입) 22 Henry Ave | Apt B#7 시/타운 Palisades Park 카운티 NJ 주 우편번호 07650 | |
| 8 유권자 등록한 최근 주소(사서함(P.O. Box)은 사용하지 마시오) | Apt 시/타운 카운티 주 우편번호 <input type="checkbox"/> 우편 <input type="checkbox"/> 인편 | |
| 9 이름을 변경하는 경우, 이전에 사용한 이름 a. 주간 전화번호(선택 항목) 201 429 425 b. 이메일 주소(선택 항목) | | |
| 10 소속 정당을 선택하시겠습니까? (선택 항목) <input type="checkbox"/> 예, 내가 소속된 정당 이름: <input type="checkbox"/> 아니오, 나는 어느 정당에도 속하지 않고 싶습니다. | | |
| 11 성별 <input checked="" type="checkbox"/> 여자 <input type="checkbox"/> 남자 | 선언 - 나는 다음을 선언 또는 확인합니다: ● 나는 미국 시민입니다 ● 나는 상기 주소에 거주합니다 ● 다음 선거일 또는 그 전에 만 18세 이상이 됩니다 ● 나는 다음 선거일로부터 최소한 30일 전 내에는 이 주와 카운티에 거주할 것입니다 ● 나는 가석방, 보호관찰명 중이거나 연방법원 또는 주 법에 따라 형사 기소되는 유죄판결로 복역 중이 아닙니다 ● 나는 위위 또는 사기 또는 유권자 등록을 할 경우 R.S. 19-11에 따라 최대 \$15,000의 벌금형이나 최대 5년의 징역형 또는 두 가지 모두를 처벌받을 수 있음을 알고 있습니다 | |
| 서명: 아래 밑줄에 서명 또는 표시를 하고 날짜를 기재하십시오 | | 만일 신청인이 본 양식을 작성할 수 없을 경우, 본 양식을 대신 작성한 사람의 이름과 주소를 인쇄체로 기재하십시오 |
| [Redacted Signature] | | 이름 Young Sik Kim 날짜 9.7 주소 22 Henry Ave Apt B7 P.K. NJ 07650 |

5, 6, 10항에 대해 주요한 지침

5) 본
거
신:

152346782



JIHAENG JI CHO
22 HENRY AVE Apt-Unit B7
PALISADES PARK NJ 07650

주

: 만일 귀하가 5항에서 요구하는 정보 중 어느 것도 보유하고 있지 않
확인을 제공해야만 하는 상황을 피하고자 사진을 수록한 현재 유효한
요청받을 것입니다.

을 것입니다. 이러한 번호를 불법으로 사용하는 자는 형사처벌을

6) 만

연락처나 위치를 6항에 기재해도 됩니다.

10) 이전의 정당 가입 여부와는 상관없이, 정당 가입 또는 비가입을 선택할 수 있습니다. 10항은 선택 기재 항목이며, 귀하의 유권자 등록 신청 수락에 영향을 미치지 않을 것입니다.

보다 자세한 정보가 필요하십니까? 아래 정보 항목 중 필요한 정보에 체크 표시하십시오.

☒ 우편 투표

☐ 투표소 직원으로 일하기

☐ 투표소 접근 편의성

☐ 시각장애인을 포함한 장애인
으로서의 투표

☐ 기타 언어로 제작된 선거 관련
자료(아래에 희망 언어 기재):

추가 정보가 필요한 경우, www.NJElections.org를 방문하거나 무료전화 1-877-NJVOTER(1-877-658-6837)로 문의하십시오.

Incomplete -



PATRICIA DI COSTANZO
SUPERINTENDENT OF ELECTIONS
COMMISSIONER OF REGISTRATION

152346782



JIHAENG JI CHO
22 HENRY AVE Apt-Unit B7
PALISADES PARK NJ 07650

BERGEN COUNTY
SUPERINTENDENT OF ELECTIONS
ONE BERGEN COUNTY PLAZA, ROOM 380
HACKENSACK, N. J. 07601
PHONE: (201) 336-6100
FAX: (201) 336-6111

Reg. 9/11/12

No Vote

THERESA M. O'CONNOR
DEPUTY SUPERINTENDENT OF ELECTIONS
DEPUTY COMMISSIONER OF REGISTRATION

NOT U.S. Citizen

10/23/12
clerk

Dear Registrant:

Our office received your Voter Registration application and the following was not completed:

*Date of Birth 04/25/1940

*You did not check if you are a US Citizen

Please mark with an X

☐ I am a US Citizen

☒ I am NOT a US Citizen

*You did not sign your application.

Signature

Print

Please return in the enclosed envelope by October 18, 2012.

Sincerely,

Patricia DiCostanzo
Patricia DiCostanzo
Superintendent of Elections

SUPERINTENDENT
OF ELECTIONS
BERGEN COUNTY, N.J.
2012 OCT 22 PM 12 02

Voter Profile

User Printed: BESPTOGU

Date: 03/30/2017

Voter Information:

Voter's Name: KIM C CHUNG
Date of Birth: 01/27/1942
Voter ID: 152627760
Legacy ID:
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit: 310
Suffix A:
Suffix B:
Street Number: 32
Street Name: PIERMONT AVE
Address Line 2:
Address Line 3:
Municipality : HILLSDALE
Postal City: HILLSDALE
State: NJ
Zip: 07642

Party Information:

Current Party: Unaffiliated
Party Privilege Date:

Miscellaneous:

Gender: Not Entered
Absentee Ballot Type: None
Registration Date: 05/06/2013
Registration Type: Agency with Identification
Last Action Taken Date: 07/19/2013

Status Information:

Voting Privilege Date:
Current Status: Rejected
Date Last Voted:
Rejected Reason: Not a U.S Citizen/Checked off No to U.S. Citizenship
Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Districts:

| | | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|--------------------|----|
| Ward | 00 | District | 05 | Congressional | 05 | Legislative | 39 |
| Freeholder | | School | | Special | | Fire | |

Previous Residence Addresses:

| Change Date | Street Number | Street Name | Address Line 2 | Address Line 3 | Unit | Municipality | State | Zip Code |
|-------------|---------------|-----------------|----------------|----------------|------|--------------|------------|----------|
| 06/21/2013 | | 32 PEIRMONT AVE | | | | HILLSDALE | New Jersey | 07642 |

Election History:

No Records Found for the Election History

Previous Party:

No Records Found for the Previous Party

Previous Name:

No Records Found for the Previous Name

Registration History:

No Records Found for the Registration History

Main Menu:

Activities

Voter Registration
Maintain Voter History
Maintain County Data
Elections

System

Show Reminders
CountyWide Batch Items
Maintain Users
Maintain Printers
Scheduled Batches
Maintain Roles
My Homepage
County Backup Access
State System Access
User Select
View Bulletins
Login History
MVC Data Export
Poll Book Printing Schedule
Duplicate Voters
Batch Scanning
Messaging
MVC DL Search
Backend Reporting
Document Imaging
Handheld Scanning

Inquiries
Reports
Help
Logout

Compare MVC - Agency

BESOEAD2 / BERGEN

| MVC Voter | | | |
|-------------------------|---|----------------------------------|--|
| Name | KIM C CHUNG | Date of Birth | 01/27/1942 |
| Residence Address | 32 PIERMONT AVE, APT 310 HILLSDALE NJ 07642-2450 | Mailing Address | |
| Driver's License Number | C36964346351422 | Original Driver's License Number | C36964346351422 |
| Card Number | | Previous DOB | 01/27/1942 |
| Previous Name | KIM C CHUNG | Previous Address | 32 PIERMONT AVE HILLSDALE NJ 07642-2435 |
| MVC Transaction Date | 05/06/2013 | | |

MVC Signature Date: 05/06/2013

Reject ☐ English:☒ Spanish:

Reject

No Card Issued

Reject Signature from Importing

| SVRS Matched Voters | | | | | | | | | | |
|-------------------------------------|-----------|-------------|---------------|-------------------|---|-----------------|-------------------------|-----|-------------------|--|
| Select | Voter Id | Name | Date of Birth | Registration Date | Residence Address | Mailing Address | Driver's License Number | SSN | Confidence Factor | Status Reason |
| <input checked="" type="checkbox"/> | 101438644 | KIM H CHUNG | 01/01/1800 | 02/18/1998 | 45 CHURCH ST, Apt-Unit G-2, MONTCLAIR, NJ 07042 | | | | 25 % | Deleted Inactive Confirmation through two federal general elections |

* under Status Reason indicates voter has multiple status reasons.

152627760



KIM C CHUNG
32 PIERMONT AVE Apt-Unit 310
HILLSDALE NJ 07642

Select Add Back No Act

Note:

If status is blank, that implies the voter status is Active.

If Confidence Factor is 100 %, that implies Driver's License Num1

If Confidence Factor is 50 %, that implies Last Name, First Name, Last Name, First Name, First Letter of Middle Name and DOB (01/01/1800) matched statewide.

If Confidence Factor is 25 %, that implies Soundex of Last Name, Soundex of First Name, DOB (Including 01/01/1800) matched statewide.

Name matching process includes MVC previous names if there is a name change.

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- NOT a US citizen -



New Jersey Voter Registration Application

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

| | | | | | | | |
|---|--|--|---------------------------|---|------------------------|--|-----------------------------|
| 1 Check boxes that apply: <input type="checkbox"/> New Registration <input type="checkbox"/> Name Change <input checked="" type="checkbox"/> Address Change <input checked="" type="checkbox"/> Signature Update <input type="checkbox"/> Political Party Affiliation or Non-affiliation Change | | | | | | FOR OFFICIAL USE ONLY | |
| 2 Are you a U.S. Citizen? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If No, DO NOT complete this form) | | | | | | Clerk | |
| 3 Last Name CHUNG | | First Name KIM | | Middle Name or Initial C | Suffix (Jr., Sr., III) | | Registration # 152627760 |
| 4 Date of Birth 01/27/1942 | | | | | | Office Time Stamp | |
| 5 NJ Driver's License Number or MVC Non-driver ID Number ID C 3696 43463 51422 | | | | | | If you DO NOT have a NJ Driver's License or MVC Non-Driver ID, provide the last 4 digits of your Social Security Number. | |
| <input type="checkbox"/> I swear or affirm that I DO NOT have a NJ Driver's License, MVC Non-driver ID or a Social Security Number. | | | | | | | |
| 6 Home Address (DO NOT use PO Box) 32 PIERMONT AVE | | Apt. 310 | Municipality HILLSDALE | County BERGEN | State NJ | Zip Code 07642 | |
| 7 Mailing Address if different from above | | Apt. | Municipality | County | State | Zip Code | |
| 8 Last Address Registered to Vote (DO NOT use PO Box) | | Apt. | Municipality | County | State | Zip Code | |
| 9 Former Name if Making Name Change | | <input type="checkbox"/> by mail <input type="checkbox"/> in person | | | | | |
| | | a. Day Phone Number (Optional) | | | | | |
| | | b. E-Mail Address (Optional) | | | | | |
| 10 Do you wish to declare a political party affiliation? <input type="checkbox"/> Yes, the party name is _____ (Optional) <input checked="" type="checkbox"/> No, I do not wish to be affiliated with any political party. | | | | | | | |
| 11 Gender <input checked="" type="checkbox"/> Female <input type="checkbox"/> Male | | Declaration - I swear or affirm that: <input checked="" type="checkbox"/> I am a U.S. Citizen <input checked="" type="checkbox"/> I live at the above address <input checked="" type="checkbox"/> I will be at least 18 years old on or before the next election <input checked="" type="checkbox"/> I will have resided in the State and county at least 30 days before the next election <input checked="" type="checkbox"/> I am not on parole, probation or serving a sentence due to a conviction for an indictable offense under any federal or state laws <input type="checkbox"/> I understand that any false or fraudulent registration may subject me to a fine of up to \$15,000, imprisonment up to 5 years, or both pursuant to R.S. 19:34-1 | | | | | |
| Signature: Sign or mark and date on lines below | | | | If applicant is unable to complete this form, print the name and address of individual who completed this form. | | | |
| | | | | Name _____ | | | |
| Date 7/13/13 | | | | Date _____ | | | |
| | | | | Address _____ | | | |

Important Instruction.

- 5) Registrants who are submitting information required by section 5, current and valid photo ID, or a dc polling place.

Note: ID Numbers are Confidential numbers illegally shall b

- 6) If you are homeless, you may (your time.
- 10) You may declare a political affiliation or you may declare to be unaffiliated, regardless of any prior party affiliation. Completing section 10 is OPTIONAL and will not affect the acceptance of your voter registration application.

Need More Information? Check boxes below if you would like to receive more information about:

- | | | |
|---|---|---|
| <input type="checkbox"/> voting by mail | <input type="checkbox"/> polling place accessibility | <input type="checkbox"/> available election materials in this alternative language: |
| <input type="checkbox"/> becoming a poll worker | <input type="checkbox"/> voting if you have a disability, including visual impairment | |

For further information visit www.NJElections.org or call toll-free 1-877-NJVOTER (1-877-658-6837)

Voter Profile

User Printed: BESPTOGU

Date: 03/30/2017

Voter Information:

Voter's Name: MARGUERIT L DABIS

Date of Birth: 09/27/1956

Voter ID: 152556480

Legacy ID:

Archived Legacy ID:

Residence Address:

County: BERGEN

Unit: 1

Suffix A:

Suffix B:

Street Number: 90

Street Name: FARVIEW
AVE S

Address Line 2:

Address Line 3:

Municipality : PARAMUS

Postal City: PARAMUS

State: NJ

Zip: 07652

Party Information:

Current Party: Unaffiliated

Party Privilege Date:

Miscellaneous:

Gender: Not Entered

Absentee Ballot Type: None

Registration Date: 12/05/2012

Registration Type: Agency with
Identification

Last Action Taken Date: 11/18/2015

Status Information:

Voting Privilege Date:

Current Status: Rejected

Date Last Voted: 11/03/2015

Rejected Reason: Not a U.S Citizen/Checked off No to
U.S. Citizenship

Poll Worker Status:

Mailing Address:

Street Number:

Suffix A:

Suffix B:

Street Name/P.O. Box:

Unit:

Address Line 2:

Address Line 3:

City:

State:

Zip Code:

Country:

Inactive Confirmation Address:

Street Number:

Suffix A:

Suffix B:

Street Name/P.O. Box:

Unit:

Address Line 2:

Address Line 3:

City:

State:

Zip Code:

Country:

Districts:

| | | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|--------------------|----|
| Ward | 00 | District | 01 | Congressional | 05 | Legislative | 38 |
| Freeholder | | School | | Special | | Fire | |

Previous Residence Addresses:

| Change Date | Street Number | Street Name | Address Line 2 | Address Line 3 | Unit | Municipality | State | Zip Code |
|-------------|---------------|-----------------|----------------|----------------|------|--------------|------------|----------|
| 02/07/2013 | | 41 GROVE STREET | | | | OAK RIDGE | New Jersey | 07438 |

Election History:

| Election Date & Name | Election Type | Election Code | Ballot Type | County Voted In | Municipality Voted In | Party Affiliation | Memo | User Scanned | Date Scanned | Date Counted | Ballot Status |
|------------------------------------|---------------|------------------|-------------|-----------------|-----------------------|-------------------|------|--------------|--------------|--------------|---------------|
| 11/03/2015- GENERAL ELECTION | General | STATE GE 2015 | Machine | BERGEN | PARAMUS | | | BESOEADM | 11/18/2015 | 11/03/2015 | |

Previous Party:

No Records Found for the Previous Party

Previous Name:

No Records Found for the Previous Name

136833468

New Jersey Voter Registration Application

I am applying to register to vote at the address listed on my NJ Drivers License/ID Card. I swear or affirm that:

- * I am a U.S. Citizen.
- * I reside at my DL/ID address displayed below.
- * I will be at least 18 years old on or before the next election.
- * I will have resided in the state and county at least 30 days before the next election.
- * I am not on parole, probation or serving sentence due to a conviction for an indictable offense under any federal or state laws.
- * I understand that any false or fraudulent registration may subject me to a fine up to \$15,000, imprisonment up to 5 years or both pursuant to R.S. 19:34-1.

Do you wish to declare a political party affiliation? (Optional)

() Yes, the party name is : _____

☒ No, I do not wish to be affiliated with any political party.

D0014 51873 59564 09-27-1956
MARGUERIT L DABIS
90 S FARVIEW AVENUE APT 1
PARAMUS NJ 07652-0000 B

152556480



MARGUERIT L DABIS
90 FARVIEW AVE S Apt-Unit 1
PARAMUS NJ 07652

JS LO201234000000206



DiCostanzo, Patricia

From: Annemarie Krusznis <akrusznis@paramusborough.org>
Sent: Thursday, November 05, 2015 1:29 PM
To: DiCostanzo, Patricia
Subject: voter registration issue
Attachments: Dabis Marguerit L. sample ballot Gen 2015.pdf

Hi Patti,
I hope you have recovered from the election! I am dead tired!

It has come to my attention that a voter in Paramus went to district 1 and
Told the board worker that they are "testing the system" by registering to vote
And voting although they are not a legal citizen.

The story repeated to me, by that board worker, was that she went to the NJMVC who asked her if she
Wanted to register to vote and she told them she only has a green card, to which the MVC
Representative told her that is fine.
She left her sample ballot and her phone number with the board worker who has now provided
That document to me (attached), and the board worker let Felix know when he was around to the polling place.

The board worker involved is Sam Casiello. I did search the SVRS system and there is a note that it is
An MVC agency transaction.
She did vote.

Annemarie Krusznis, RMC
Borough of Paramus
One Jockish Square
Paramus, NJ 07652
akrusznis@paramusborough.org
201-265-2100 ext 2205

152556480



MARGUERIT L DABIS
90 FARVIEW AVE S Apt-Unit 1
PARAMUS NJ 07652

Joanne Talmucci



BERGEN COUNTY
SUPERINTENDENT OF ELECTIONS
ONE BERGEN COUNTY PLAZA, ROOM 380
HACKENSACK, N. J. 07601
PHONE: (201) 336-6100
FAX: (201) 336-6111

PATRICIA DI COSTANZO
SUPERINTENDENT OF ELECTIONS
COMMISSIONER OF REGISTRATION

THERESA M. O'CONNOR
DEPUTY SUPERINTENDENT OF ELECTIONS
DEPUTY COMMISSIONER OF REGISTRATION

December 8, 2015

152556480
MARGUERIT L DABIS
90 FARVIEW AVE S APT 1
PARAMUS NJ 07652

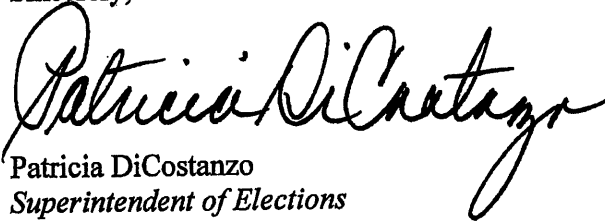
Dear Voter:

There are some questions regarding your Voter Registration.

It is important that you contact this office immediately and set up an appointment to meet with the Superintendent of Elections. Please call (201) 336-6101, Monday through Friday; between the hours of 8:30 AM and 4:30 PM.

Your prompt attention to this matter is greatly appreciated.

Sincerely,


Patricia DiCostanzo
Superintendent of Elections

dh/

152556480



MARGUERIT L DABIS
90 FARVIEW AVE S Apt-Unit 1
PARAMUS NJ 07652

2nd Hr
appt: w/ SOE



BERGEN COUNTY
SUPERINTENDENT OF ELECTIONS
ONE BERGEN COUNTY PLAZA, ROOM 380
HACKENSACK, N. J. 07601
PHONE: (201) 336-6100
FAX: (201) 336-6111

PATRICIA DI COSTANZO
SUPERINTENDENT OF ELECTIONS
COMMISSIONER OF REGISTRATION

THERESA M. O'CONNOR
DEPUTY SUPERINTENDENT OF ELECTIONS
DEPUTY COMMISSIONER OF REGISTRATION

152556480
MARGUERIT L DABIS
90 FARVIEW AVE S APT 1
PARAMUS NJ 07652

January 19, 2016

Dear Voter:

This is the last request regarding your voter registration, if you do not respond to this request you will be subpoenaed.

It is important that you contact this office immediately and set up an appointment to meet with the Superintendent of Elections. Please call (201) 336-6101, Monday through Friday; between the hours of 8:30 AM and 4:30 PM.

If you have not met with the Superintendent of Elections within fourteen (14) days of this letter you will be subpoenaed.

Your prompt response in this matter is greatly appreciated.

Sincerely,

Patricia DiCostanzo
Superintendent of Elections

dh/

152556480



MARGUERIT L DABIS
90 FARVIEW AVE S Apt-Unit 1
PARAMUS NJ 07652

NON-PROFIT ORG.
U.S. POSTAGE
PAID
COUNTY OF BERGEN
OFFICE OF THE
COUNTY CLERK

RETURN SERVICE REQUESTED

-8203188

11

Reg. @ DMV



152556480



MARGUERIT L DABIS
90 FARVIEW AVE S Apt-Unit 1
PARAMUS NJ 07652

1 5 2 3 5 6 4 8 0

Marguerit L Dabls

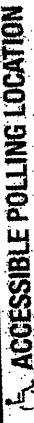
90 S Farview Ave # 1

Paramus, NJ 07652-2512

A 00 01

If not delivered within two (2) days return to:
Commissioner of Registration
One Bergen County Plaza, Room 380
Hackensack, NJ 07601

YOU VOTE HERE
SU VOTO AQUI
여기서 투표하십시오



ACCESSIBLE POLLING LOCATION
The Polling Place for this Election District is
El Lugar de Votación Para Este Distrito Electoral está en
귀하의 선거구 투표소는

BOROUGH OF PARAMUS

WARD NO: 00 DISTRICT NO: 01

Paramus High School - Gym
99 E Century Rd

Polls Open/Las Urnas Se Abren/ 투표소 개장시간 6 A.M. to 8 P.M.
Tuesday, November 3, 2015
Martes, 3 de noviembre de 2015
2015년 11월 3일 화요일

Bergen County, NJ
Condado de Bergen, NJ
뉴저지, 버겐 카운티

Voter Profile

User Printed: BESOEAD2
Date: 03/29/2017

Voter Information:

Voter's Name: MARIA T DEGUZMAN
Date of Birth: 06/26/1959
Voter ID: 152397455
Legacy ID:
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit:
Suffix A:
Suffix B:
Street Number: 132
Street Name: E MAIN ST
Address Line 2:
Address Line 3:
Municipality : BOGOTA
Postal City: BOGOTA
State: NJ
Zip: 07603

Party Information:

Current Party: Unaffiliated
Party Privilege Date: 09/27/2012

Miscellaneous:

Gender: Not Entered
Absentee Ballot Type: None
Registration Date: 09/06/2012
Registration Type: Agency with Identification
Last Action Taken Date: 10/09/2012

Status Information:

Voting Privilege Date: 09/27/2012
Current Status: Deleted
Date Last Voted:
Deleted Date: 10/09/2012
Deleted Reason: Administrative Action
Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Districts:

| | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|-----------------------|
| Ward | 00 | District | 02 | Congressional | 05 | Legislative 37 |
| Freeholder | | School | | Special | | Fire |

Previous Residence Addresses:

| Change Date | Street Number | Street Name | Address Line 2 | Address Line 3 | Unit | Municipality | State | Zip Code |
|-------------|---------------|---------------|----------------|----------------|------|--------------|------------|----------|
| 10/04/2012 | | 35 WALNUT AVE | | | | BOGOTA | New Jersey | 07603 |

Election History:

No Records Found for the Election History

Previous Party:

No Records Found for the Previous Party

Previous Name:

No Records Found for the Previous Name

Registration History:

No Records Found for the Registration History

Miscellaneous Memo

**BESOEAD2 /
BERGEN**

Memo :

NOT A US CITIZEN-PER VOTER

Close

Main Menu:

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Voter Registration

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 Voter Mail-In Ballot Request
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 Voter DIA
 MVC File

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Logout

New/musi

Compare MVC - Agency


BESOEAD2 / BERGEN

| MVC Voter | | | |
|-------------------------|--|----------------------------------|---------------------------------------|
| Name | MARIA T DEGUZMAN | Date of Birth | 06/26/1959 |
| Residence Address | 132 MAIN ST EAST BOGOTA NJ 07603-1345 | Mailing Address | |
| Driver's License Number | D22355198356592 | Original Driver's License Number | D22355198356592 |
| Card Number | | Previous DOB | 06/26/1959 |
| Previous Name | MARIA T DEGUZMAN | Previous Address | 35 WALNUT AVE BOGOTA NJ 07603-1601 |
| MVC Transaction Date | 09/05/2012 | | |

Reject ☐ English:☒ Spanish:

Reject

Reject
Signature from
Importing

| SVRS Matched Voters | | | | | | | | | | | |
|-------------------------------------|-----------|---|---------------|-------------------|--|-----------------|-------------------------|-----|-------------------|---------|---|
| Select | Voter Id | Name | Date of Birth | Registration Date | Residence Address | Mailing Address | Driver's License Number | SSN | Confidence Factor | Status | Status Reason |
| <input checked="" type="checkbox"/> | 121100626 | MARIA L DI GIACOMO | 01/01/1800 | 07/06/1981 | 142 DUNDEE AVE, PATERSON, NJ 07503 | | | | 25 % | | |
| | | 152397455 | | | | | | | 25 % | Deleted | Moved out of County |
| | |  | | | | | | | 25 % | Deleted | Inactive Confirmation through two federal general elections |
| | | MARIA T DEGUZMAN 132 E MAIN ST BOGOTA NJ 07603 | | | | | | | 25 % | Deleted | Deceased |

1

Note:

If status is blank, that implies the voter status is Active.

If Confidence Factor is 100 %, that implies Driver's License Number is matched statewide.

If Confidence Factor is 50 %, that implies Last Name, First Name, DOB (or)

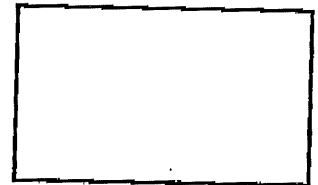
Last Name, First Name, First Letter of Middle Name and DOB (01/01/1800) matched statewide.

If Confidence Factor is 25 %, that implies Soundex of Last Name, Soundex of First Name, DOB (Including 01/01/1800) matched statewide.

Name matching process includes MVC previous names if there is a name change.

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If not delivered in two days, return to
Superintendent of Elections
1 Bergen County Plaza,
Room 380
Hackensack, NJ 07601



RETURN SERVICE REQUESTED

County of Bergen, New Jersey

Voter Acknowledgement Card

Recibo de tarjeta de votantes

유권자 확인 카드

152397455 M-0204 W-00 D-02

MARIA T DEGUZMAN

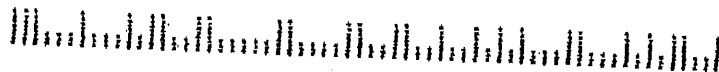
132 E MAIN ST

BOGOTA NJ 07603

152397455

09/06/2012

0204 00 02



152397455



MARIA T DEGUZMAN
132 E MAIN ST
BOGOTA NJ 07603

Registration

BESPTOGU /
BERGEN

Previous Address

Previous Party

Party Information:

Current Party: Unaffiliated

Party Privilege Date: 09/27/2012

- ☐ County Committee
☐ Municipal Chair
☐ Provisional Ballot Registration

Print Voter Profile

- Date of Birth ☐
Previous Address ☐
Previous Party ☐
Election History ☐
Previous Name ☒
Registration History ☐
Polling Place ☐

Residence Address:

County: BERGEN

Unit:

Suffix A:

Suffix B:

Street Number: 132

Street Name: E MAIN ST

Address Line 2:

Address Line 3:

Municipality: BOGOTA

Postal City: BOGOTA

State: NJ

Zip: 07603

Voter's Name: MARIA T
DEGUZMAN

Date of Birth: 06/26/1959

Voter ID: 152397455

NJ Driver's License / State
ID: D22355198356592

Legacy ID:

Archived Legacy ID:

Telephone #:

Fax #:

Email:

Status Information:

Voting Privilege Date:
09/27/2012

Current Status: Active

Date Last Voted:

Poll Worker Status:

Miscellaneous:

Gender: Not Entered

Military/Overseas Status: None

Registration Date: 09/06/2012

Registration Type: Agency with
Identification

Last Action Taken Date: 10/04/2012

Memo

Display Signature

Signature History

Poll Worker History

Ward and District Audit History

Mail-In Ballots

Audit History

Deleted History

Election History

Mailing Address:

Street Number

Suffix A

Suffix B

Street Name/P.O. Box Unit

Address Line 2

Address Line 3

City

State

Zip Code

Country

Inactive Confirmation Address:

Street Number

Suffix A

Suffix B

Street Name/P.O. Box Unit

Address Line 2

Address Line 3

City

State

Zip Code

Country

Person Providing Assistance:

Last Name:

First Name:

Suffix:

Street Name/P.O. Box Unit

Street Number

Suffix A

Suffix B

Address Line 2

Address Line 3

Municipality

State

Zip Code

Districts:

Municipality
Congressional
School

BOGOTA
05

Ward
Legislative
Special

00
37

District
Freeholder
Fire

02

Next Election Date -- Name 11/06/2012 -- GENERAL ELECTION

Voter Deletions

County Data

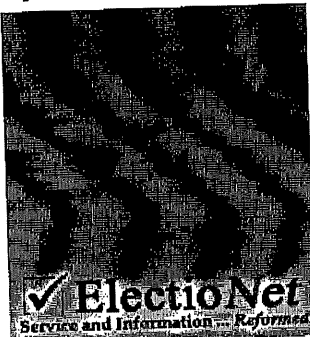
Purged Voters

MVC File

Reports

Help

Logout



not a
US citizen
Jag
10/09/2012

Polling Place

Name

BOGOTA HIGH SCHOOL GYM

Address

ONE HENRY LUTHIN PL
BOGOTA 07603

Memo:

MVC AGENCY

MVC TRANSACTION DATE - 09/06/2012 ,BESOEAD2

[Previous](#)

STATE Admin Message --> Have a nice day.

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Main Menu:

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Voter Change Audit

Voter Deletions

County Data

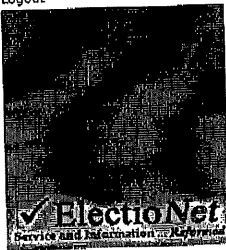
Purged Voters

MVC File

Reports

Help

Logout



Select Voter - Inquiry Voter Registration

BESPTOGU /
BERGEN

Voters Displayed: 1-10 Total voters: 13

| Select | Status | Last Name | First Name | Middle Name | Suffix | Date of Birth | Residence Address | Voter Id | Status Reason | Deleted Date | Party Affiliation | Municipality Name-Ward-District | Postal Municipality |
|--------------------------|-------------------------------------|-------------|------------|-------------|--------|---------------|---|-----------|---|--------------|-------------------|---------------------------------|---------------------|
| <input type="checkbox"/> | | CASTELLANOS | ALFREDO | | | 08/26/1923 | 132 E MAIN ST, BOGOTA, NJ 07603 | 119286202 | | | Unaffiliated | BOGOTA-00-02 | BOGOTA |
| <input type="checkbox"/> | | CASTELLANOS | HECTOR | | | 11/07/1946 | 132 E MAIN ST, BOGOTA, NJ 07603 | 121426001 | | | Unaffiliated | BOGOTA-00-02 | BOGOTA |
| <input type="checkbox"/> | | CASTELLANOS | MARIA | T | | 04/26/1925 | 132 E MAIN ST, Apt-Unit 1, BOGOTA, NJ 07603 | 119284546 | | | Unaffiliated | BOGOTA-00-02 | BOGOTA |
| <input type="checkbox"/> | | CASTELLANOS | SIGIFREDO | | | 06/06/1944 | 132 E MAIN ST, BOGOTA, NJ 07603 | 119662563 | Verification/Postal Notice | | Democratic* | BOGOTA-00-02 | BOGOTA |
| <input type="checkbox"/> | Deleted | CHONG | SUSEY | | | 01/13/1963 | 132 E MAIN ST FLOOR 1, BOGOTA, NJ 07603 | 119484335 | Inactive Confirmation through two federal general elections | 02/11/2009 | Unaffiliated | BOGOTA-00-02 | BOGOTA |
| <input type="checkbox"/> | | DEGUZMAN | MARIA | R | | 08/20/1956 | 132 E MAIN ST, BOGOTA, NJ 07603 | 119713592 | | | Democratic* | BOGOTA-00-02 | BOGOTA |
| <input type="checkbox"/> | | DEGUZMAN | MARIA | T | | 06/26/1959 | 132 E MAIN ST, BOGOTA, NJ 07603 | 152397455 | | | Unaffiliated | BOGOTA-00-02 | BOGOTA |
| <input type="checkbox"/> | | ELSADANY | HAMADA | M | | 11/06/1973 | 132 E MAIN ST BSMT, BOGOTA, NJ 07603 | 152214008 | | | Democratic* | BOGOTA-00-02 | BOGOTA |
| <input type="checkbox"/> | Inactive Confirmation 07/02/2012 | GOMEZ | MARIA | G | | 09/02/1965 | 132 E MAIN ST, Apt-Unit 2, BOGOTA, NJ 07603 | 151037686 | | | Unaffiliated | BOGOTA-00-02 | BOGOTA |
| <input type="checkbox"/> | Deleted | MONTALVO | MARITSA | | | 01/05/1977 | 132 E MAIN ST, Apt-Unit 1, BOGOTA, NJ 07603 | 119494260 | Inactive Confirmation through two federal general elections | 03/28/2005 | Unaffiliated | BOGOTA-00-02 | BOGOTA |

1 2

Go

Next 10

Display Signature

View VR Form

View

Previous

Change

Scan/Print

Note: If status is blank, that implies the voter status is Active.

* under Status Reason indicates voter has multiple status reasons.

STATE Admin Message --> Have a nice day.

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PATRICIA DI COSTANZO
SUPERINTENDENT OF ELECTIONS
COMMISSIONER OF REGISTRATION

BERGEN COUNTY
SUPERINTENDENT OF ELECTIONS
ONE BERGEN COUNTY PLAZA, ROOM 380
HACKENSACK, N. J. 07601
PHONE: (201) 336-6100
FAX: (201) 336-6111

THERESA M. O'CONNOR
DEPUTY SUPERINTENDENT OF ELECTIONS
DEPUTY COMMISSIONER OF REGISTRATION

October 9, 2012

RE: Maria T. DeGuzman
132 E. Main Street
Bogota, NJ 07603

DOB: June 26, 1959

Maria T. DeGuzman registered to vote September 6, 2012

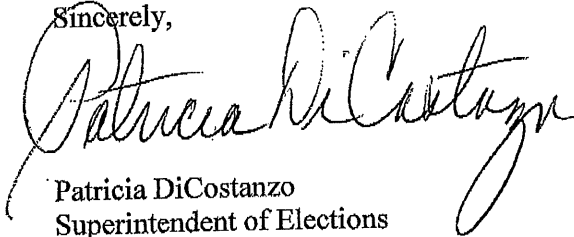
Maria T. DeGuzman has never voted.

A certified copy of her voter profile, showing she was removed from the rolls, per her request, is enclosed.

Ms. DeGuzman went to Motor Vehicle and was asked if she wanted to register to vote and answered yes. She stated that she did not realize that she had to be a citizen to be eligible to vote.

If you have any questions, please do not hesitate to call this office.

Sincerely,



Patricia DiCostanzo
Superintendent of Elections

Voter Profile

User Printed: BESOEAD2

Date: 03/29/2017

Voter Information:

Voter's Name: VINCENZA E
DELL'UTRI

Date of Birth: 11/14/1955

Voter ID: 521505658

Legacy ID:

Archived Legacy ID:

Residence Address:

County: BERGEN

Unit:

Suffix A:

Suffix B:

Street Number: 54

Street Name: DAN P CONTE/GOLDEN AGE
CT

Address Line 2:

Address Line 3:

Municipality : GARFIELD

Postal City: GARFIELD

State: NJ

Zip: 07026

Party Information:

Current Party: Unaffiliated

Party Privilege Date: 12/15/2014

Miscellaneous:

Gender: Not Entered

Absentee Ballot Type: None

Registration Date: 11/24/2014

Registration Type: Mail-in with
Identification

Last Action Taken Date: 02/03/2015

Status Information:

Voting Privilege Date: 12/15/2014

Current Status: Deleted

Date Last Voted:

Deleted Date: 02/03/2015

Deleted Reason: Administrative
Action

Poll Worker Status:

Mailing Address:

Street Number:

Suffix A:

Suffix B:

Street Name/P.O. Box:

Unit:

Address Line 2:

Address Line 3:

City:

State:

Zip Code:

Country:

Inactive Confirmation Address:

Street Number:

Suffix A:

Suffix B:

Street Name/P.O. Box:

Unit:

Address Line 2:

Address Line 3:

City:

State:

Zip Code:

Country:

Districts:

| | | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|--------------------|----|
| Ward | 04 | District | 03 | Congressional | 09 | Legislative | 35 |
| Freeholder | | School | | Special | | Fire | |

Previous Residence Addresses:

No Records Found for the Previous Residence Addresses

Election History:

No Records Found for the Election History

Previous Party:

No Records Found for the Previous Party

Previous Name:

| Date Changed | Last Name | First Name | Middle Name | Suffix |
|--------------|-----------|------------|-------------|--------|
| 01/21/2015 | DELL'ITRI | VINCENZA | E | |

Registration History:

No Records Found for the Registration History

Miscellaneous Memo

**BESOEAD2 /
BERGEN**

Memo :

NOT A U S CITIZEN


Close



New Jersey Voter Registration Application

76

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

| | | | | | |
|--|--|---|---|---|-------------|
| 1 Check boxes that apply: <input type="checkbox"/> New Registration <input type="checkbox"/> Address Change <input type="checkbox"/> Political Party Affiliation or Non-affiliation Change <input type="checkbox"/> Name Change <input type="checkbox"/> Signature Update | | | | FOR OFFICIAL USE ONLY Clerk: _____ Registration # _____ Office Time Stamp _____ | |
| 2 Are you a U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No (If No, DO NOT complete this form) Will you be 18 years of age by the next election? <input type="checkbox"/> Yes <input type="checkbox"/> No (If No, DO NOT complete this form) | | | | | |
| 3 Last Name: DELL'UTRI | | First Name: VINCENZA | | Middle Name or Initial: ENZA | |
| 4 Date of Birth: _____ | | | | | |
| 5 NJ Driver's License Number or MVC Non-driver ID Number: 0240275900 61552 | | | | If you DO NOT have a NJ Driver's License or MVC Non-Driver ID, provide the last 4 digits of your Social Security Number: _____ | |
| <input type="checkbox"/> "I swear or affirm that I DO NOT have a NJ Driver's License, MVC Non-driver ID or a Social Security Number." | | | | | |
| 6 Home Address (DO NOT use P.O. Box): 54 DANIEL P.C.C. | | Apt.: 54 | Municipality: Garfield | County: P.S. | State: P.S. |
| 7 Mailing Address if different from above: | | Apt.: | Municipality: | County: | State: |
| 8 Last Address Registered to Vote (DO NOT use P.O. Box): | | Apt.: | Municipality: | County: | State: |
| <input type="checkbox"/> by mail <input type="checkbox"/> in person | | | | | |
| 9 Former Name if Making Name Change: | | | a. Day Phone Number (Optional): 973-816-0495 b. E-Mail Address (Optional): | | |
| 10 Do you wish to declare a political party affiliation? <input type="checkbox"/> Yes, the party name is: _____ (Optional) <input type="checkbox"/> No, I do not wish to be affiliated with any political party. | | | | | |
| 11 Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male | | Declaration: I swear or affirm that: • I am a U.S. Citizen • I live at the above address • I will be at least 18 years old on or before the next election • I will have resided in the State and county at least 30 days before the next election • I am not on parole, probation or serving a sentence due to a conviction for an indictable offense under any federal or state laws • I understand that any false or fraudulent registration may subject me to a fine of up to \$15,000, imprisonment up to 5 years, or both pursuant to R.S. 19:34-1 | | | |
| Signature: Sign or mark and date on lines below  | | | | If applicant is unable to complete this form, print the name and address of individual who completed this form: Name: _____ Date: _____ Address: _____ | |

Important Instructions for sections 5, 6 and 10

521505658



VINCENZA E DELL'UTRI
54 DAN P CONTE/GOLDEN AGE CT
GARFIELD NJ 07026

When registering to vote for the first time, if you do not have any of the provide cannot be verified, you will be asked to provide a COPY of a name and current address on it to avoid having to provide

used by any governmental agency. Any person who uses such nalties.

providing a contact point or the location where you spend most of

10) You may declare a political affiliation or you may declare to be unaffiliated, regardless of any prior party affiliation. Completing section 10 is OPTIONAL and will not affect the acceptance of your voter registration application.

Need More Information? Check boxes below if you would like to receive more information about:

☐ voting by mail
☐ becoming a poll worker

☐ polling place accessibility
☐ voting if you have a disability, including visual impairment

☐ available election materials in this alternative language.

For further information visit Elections.NJ.gov or call toll-free 1-877-NJVOTER (1-877-658-6837)

NJ Secretary of Elections - 6/22/02



Not U.S. Citizen
2/3/15
citizen

New Jersey

Voter Registration Application

76

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

| | | | | | |
|---|--|---|--|--|--|
| 1 Check boxes that apply: <input type="checkbox"/> New Registration <input type="checkbox"/> Name Change <input type="checkbox"/> Address Change <input type="checkbox"/> Signature Update <input type="checkbox"/> Political Party Affiliation or Non-affiliation Change | | | | FOR OFFICIAL USE ONLY Clerk Registration # Office Time Stamp | |
| 2 Are you a U.S. Citizen? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If No, DO NOT complete this form) | | Will you be 18 years of age by the next election? <input type="checkbox"/> Yes <input type="checkbox"/> No (If No, DO NOT complete this form) | | | |
| 3 Last Name <u>DELL'UTRI</u> | | First Name <u>Vincenza</u> | | Middle Name or Initial Suffix (Jr., Sr., III) | |
| 4 Date of Birth <u>11-14-55</u> | | | | | |
| 5 NJ Driver's License Number or MVC Non-driver ID Number If you DO NOT have a NJ Driver's License or MVC Non-Drive ID, provide the last 4 digits of your Social Security Number. <input type="checkbox"/> "I swear or affirm that I DO NOT have a NJ Driver's License, MVC Non-driver ID or a Social Security Number." | | | | | |
| 6 Home Address (DO NOT use PO Box) <u>50 DANIEL P CONTE CT, GARFIELD</u> | | Apt. _____ Municipality <u>Bergen</u> County <u>NY</u> State <u>07026</u> Zip Code | | State Zip Code | |
| 7 Mailing Address If different from above | | Apt. _____ Municipality _____ County _____ State _____ Zip Code _____ | | State Zip Code | |
| 8 Last Address Registered to Vote (DO NOT use PO Box) | | Apt. _____ Municipality _____ County _____ State _____ Zip Code _____ | | <input type="checkbox"/> by mail <input type="checkbox"/> In person | |
| 9 Former Name if Making Name Change | | a. Day Phone Number (Optional) _____ b. E-Mail Address (Optional) _____ | | | |
| 10 Do you wish to declare a political party affiliation? <input type="checkbox"/> Yes, the party name is _____ (Optional) <input type="checkbox"/> No, I do not wish to be affiliated with any political party. | | | | | |
| 11 Gender <input type="checkbox"/> Female <input type="checkbox"/> Male | | Declaration - I swear or affirm that: <input checked="" type="checkbox"/> I am a U.S. Citizen <input checked="" type="checkbox"/> I live at the above address <input checked="" type="checkbox"/> I will be at least 18 years old on or before the next election <input type="checkbox"/> I will have resided in the State and county at least 30 days before the next election <input type="checkbox"/> I am not on parole, probation or serving a sentence due to a conviction for an indictable offense under any federal or state laws <input type="checkbox"/> I understand that any false or fraudulent registration may subject me to a fine of up to \$15,000, imprisonment up to 5 years, or both pursuant to R.S. 19:34-1 | | | |
| Signature: Sign or mark and date on lines below <u>[Signature]</u> Date <u>1/28/15</u> | | | | If applicant is unable to complete this form, print the name and address of individual who completed this form. Name _____ Date _____ Address _____ | |

521505658



VINCENZA E DELL'UTRI
54 DAN P CONTE/GOLDEN AGE CT
GARFIELD NJ 07026

ons 5, 6 and 10

ind are registering to vote for the first time: If you do not have any of the you provide cannot be verified, you will be asked to provide a COPY of a our name and current address on it to avoid having to provide

be released by any governmental agency. Any person who uses such al penalties.

- 6) If you are homeless, you may complete section 6 by providing a contact point or the location where you spend most of your time.
- 10) You may declare a political affiliation or you may declare to be unaffiliated, regardless of any prior party affiliation. Completing section 10 is OPTIONAL and will not affect the acceptance of your voter registration application.

Need More Information? Check boxes below if you would like to receive more information about:

- ☐ voting by mail
☐ becoming a poll worker

- ☐ polling place accessibility
☐ voting if you have a disability, including visual impairment

- ☐ available election materials in this alternative language:

For further information visit Elections.NJ.gov or call toll-free 1-877-NJVOTER (1-877-658-6837)

Voter Profile

User Printed: BESSPARS
Date: 03/30/2017

Voter Information:

Voter's Name: MUHAMMET ERARSLAN
Date of Birth: 05/05/1978
Voter ID: 152441502
Legacy ID:
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit:
Suffix A:
Suffix B:
Street Number: 861
Street Name: QUEEN ANNE RD
Address Line 2:
Address Line 3:
Municipality : TEANECK
Postal City: TEANECK
State: NJ
Zip: 07666

Party Information:

Current Party: Unaffiliated
Party Privilege Date:

Miscellaneous:

Gender: Not Entered
Absentee Ballot Type: None
Registration Date: 09/01/2014
Registration Type: Agency with Identification
Last Action Taken Date: 09/26/2014

Status Information:

Voting Privilege Date:
Current Status: Rejected
Date Last Voted:
Rejected Reason: Not a U.S Citizen/Checked off No to U.S. Citizenship
Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Districts:

| | | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|--------------------|----|
| Ward | 00 | District | 18 | Congressional | 05 | Legislative | 37 |
| Freeholder | | School | | Special | | Fire | |

Previous Residence Addresses:

| Change Date | Street Number | Street Name | Address Line 2 | Address Line 3 | Unit | Municipality | State | Zip Code |
|-------------|---------------|-----------------------|----------------|----------------|------|--------------|------------|----------|
| 12/14/2015 | 7512 | PARK AVE | | | 31 | NORTH BERGEN | New Jersey | 07047 |
| 09/26/2014 | 56 | BRUAN PL | | | B | CLIFTON | New Jersey | 07012 |
| 10/14/2012 | | 7512 PARK AVE, APT 31 | | | | NORTH BERGEN | New Jersey | 07047 |
| 08/06/2010 | 19 | HIGH ST | | | | NEWTON | New Jersey | 07860 |

Election History:

No Records Found for the Election History

Previous Party:

No Records Found for the Previous Party

Previous Name:

| Date Changed | Last Name | First Name | Middle Name | Suffix |
|--------------|-----------|------------|-------------|--------|
| 12/14/2015 | ERARSLAN | MUHAMMET | | |

Registration History:

| Prior County | Registration Date | Last Status | Date of Status | Status Reason | Date of Transfer |
|--------------|-------------------|-------------|----------------|---------------|------------------|
| PASSAIC | 09/25/2012 | Active | | | 09/26/2014 |

Main Menu:

Activities

Voter Registration

Add/Change Voter
 Voter With No DOB
 Voter Address Change
 Confirmation
 MVC - Agency

MVC File Online Voter

Maintain Voter History
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 Messaging
 MVC DL Search

Inquiries

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Help

Logout

Compare MVC File - Online Voter

BESKSINC /

T/Kochy

| MVC Voter | | | |
|-------------------------|--|----------------------------------|--|
| Name | MUHAMMET ERARSLAN | Date of Birth | 05/05/1978 |
| Residence Address | 861 QUEEN ANNE RD TEANECK NJ 07666-4642 | Mailing Address | |
| Driver's License Number | E72075680005785 | Original Driver's License Number | E72075680005785 |
| Card Number | | Previous DOB | 05/05/1978 |
| Previous Name | MUHAMMET ERARSLAN | Previous Address | 56 BRUAN PLACE, APT B CLIFTON NJ 07012-1394 |
| MVC Transaction Date | 09/01/2014 | | |

MVC Signature Date: 11/20/2012

Reject ☐ English:☐ Spanish:

Reject

| SVRS Matched Voters | | | | | | | | | | |
|-------------------------------------|-----------|-------------------|---------------|-------------------|---|-----------------|-------------------------|-----|-------------------|----|
| Select | Voter Id | Name | Date of Birth | Registration Date | Residence Address | Mailing Address | Driver's License Number | SSN | Confidence Factor | St |
| <input checked="" type="checkbox"/> | 152441502 | MUHAMMET ERARSLAN | 05/05/1978 | 09/25/2012 | 56 BRUAN PL, Apt- Unit B, CLIFTON, NJ 07012 | | E72075680005785 | | 100 % | |

* under Status Reason indicates voter has multiple status reasons.

152441502



MUHAMMET ERARSLAN
 861 QUEEN ANNE RD
 TEANECK NJ 07666

Select Add Back

Note:

If status is blank, that implies the voter status is Active.

If Confidence Factor is 100 %, that implies Driver's License.

If Confidence Factor is 50 %, that implies Last Name, First Last Name, First Name, First Letter of Middle Name and DC.

If Confidence Factor is 25 %, that implies Soundex of Last Name, Soundex of First Name, DOB (including 01/01/1800) matched statewide.

Name matching process includes MVC previous names if there is a name change.

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152441502



MUHAMMET ERARSLAN
861 QUEEN ANNE RD
TEANECK NJ 07666

12/10/2015
Thursday

to Whom It May Concern; ^{not a citizen}
12/10/15
~~Kathy~~

I, Muhammet Erarslan, would like
to be removed from the voters list.

Thank You



Muhammet Erarslan
861 Queen Anne Rd
Teaneck, NJ, 07666

2015 DEC 10 PM 12:19
SUPERINTENDENT
OF ELECTIONS
BERGEN COUNTY, N.J.



BERGEN COUNTY
SUPERINTENDENT OF ELECTIONS
ONE BERGEN COUNTY PLAZA, ROOM 380
HACKENSACK, N. J. 07601
PHONE: (201) 336-6100
FAX: (201) 336-6111

PATRICIA DI COSTANZO
SUPERINTENDENT OF ELECTIONS
COMMISSIONER OF REGISTRATION

THERESA M. O'CONNOR
DEPUTY SUPERINTENDENT OF ELECTIONS
DEPUTY COMMISSIONER OF REGISTRATION

December 10, 2015

Muhammet Erarslan
861 Queen Anne Road
Teaneck, NJ 07666

DOB: 05/05/1978

Dear Mr. Erarslan:

You registered to vote September 1, 2014 thru MVC. The record reflects that you never voted.

A certified copy of your voter profile, showing you were removed from the rolls December 10, 2015, per your request, is enclosed.

If you have any questions, please do not hesitate to call this office.

Sincerely,

A handwritten signature in cursive script, reading "Patricia DiCostanzo".

Patricia DiCostanzo
Superintendent of Elections

Voter Profile

User Printed: BESOEAD2
Date: 03/31/2017

Voter Information:

Voter's Name: ANA M ESTEPAN
Date of Birth: 02/25/1960
Voter ID: 119795765
Legacy ID: K009783
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit:
Suffix A:
Suffix B:
Street Number: 433
Street Name: PARK ST
Address Line 2:
Address Line 3:
Municipality : HACKENSACK
Postal City: HACKENSACK
State: NJ
Zip: 07601

Party Information:

Current Party: Unaffiliated
Party Privilege Date:

Miscellaneous:

Gender: Female
Absentee Ballot Type: None
Registration Date: 10/03/2005
Registration Type: Mail-in without Identification
Last Action Taken Date: 08/28/2012

Status Information:

Voting Privilege Date: 11/01/2005
Current Status: Deleted
Date Last Voted:
Deleted Date: 08/28/2012
Deleted Reason: Voter Requested
Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Districts:

| | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|-----------------------|
| Ward | 05 | District | 01 | Congressional | 05 | Legislative 37 |
| Freeholder | | School | | Special | | Fire |

Previous Residence Addresses:

No Records Found for the Previous Residence Addresses

Election History:

No Records Found for the Election History

Previous Party:

No Records Found for the Previous Party

Previous Name:

No Records Found for the Previous Name

Registration History:

No Records Found for the Registration History

DELETED AS PER VOTER. NOT A US CITIZEN.-
08/28/2012, BESDHERN

[Previous](#)

BERGEN County Admin Message --> Have a nice day.

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1.9.0



BERGEN COUNTY
SUPERINTENDENT OF ELECTIONS
ONE BERGEN COUNTY PLAZA, ROOM 380
HACKENSACK, N. J. 07601
PHONE: (201) 336-6100
FAX: (201) 336-6111

PATRICIA DI COSTANZO
SUPERINTENDENT OF ELECTIONS
COMMISSIONER OF REGISTRATION

THERESA M. O'CONNOR
DEPUTY SUPERINTENDENT OF ELECTIONS
DEPUTY COMMISSIONER OF REGISTRATION

August 23, 2012

Ana M Estepan
433 Park St
Hackensack, NJ 07601-4405

Dear Ana,

On August 17, 2012, you came into our office to inquire about your Voter Registration.

You were asked to contact Patricia DiCostanzo, Superintendent of Elections at (201) 336-6121, to set up an appointment to review your voter registration status.

As of today you have not contacted the Superintendent of Elections as requested. It is important that you contact this office immediately. Please call (201) 336-6121, Monday through Friday, between 8:30 AM and 4:30 PM, concerning this matter.

Your prompt attention to this matter is greatly appreciated.

Sincerely,

Patricia DiCostanzo
Superintendent of Elections

dh/

Patti

8-17-12

Ana Estepan is applying for
US citizenship.

I gave her your name & #,
then told her to call and
make an appointment to
see you (SOE).

8/28/12 11:30am

LTR sent 8-23-12



BERGEN COUNTY
SUPERINTENDENT OF ELECTIONS
ONE BERGEN COUNTY PLAZA, ROOM 380
HACKENSACK, N. J. 07601
PHONE: (201) 336-6100
FAX: (201) 336-6111

PATRICIA DI COSTANZO
SUPERINTENDENT OF ELECTIONS
COMMISSIONER OF REGISTRATION

THERESA M. O'CONNOR
DEPUTY SUPERINTENDENT OF ELECTIONS
DEPUTY COMMISSIONER OF REGISTRATION

August 28, 2012

RE: Ana M. Estepan
433 Park Street
Hackensack, NJ 07601

DOB: February 25, 1960

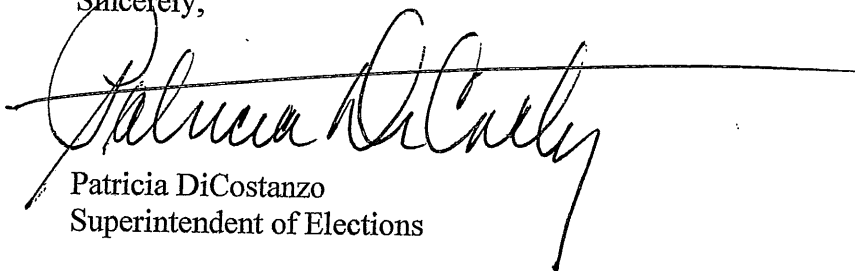
Ana Estepan registered to vote October 3, 2005

Ana Estepan has never voted.

A certified copy of her voter profile, showing she was removed from the rolls, per her request, is enclosed.

If you have any questions, please do not hesitate to call this office.

Sincerely,



Patricia DiCostanzo
Superintendent of Elections

not delivered within two (2) days return to:
Commissioner of Registration
Merger County Plaza, Room 380
Hackensack, NJ 07601

NON-PROFIT ORG.
U.S. POSTAGE
PAID
COUNTY OF BERGEN
OFFICE OF THE
COUNTY CLERK

OFFICIAL
ELECTION MAIL™
Authorized by the U.S. Postal Service.

RETURN SERVICE REQUESTED

**YOU VOTE HERE
SU VOTO AQUÍ
여기서 투표하십시오**

ACCESSIBLE POLLING LOCATION

The Polling Place for this Election District is
El Lugar de Votación Para Este Distrito Electoral está en
귀하의 선거구 투표소는

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WARD NO. 05 DISTRICT NO. 01

Cda Church
80 Grand Ave

CITY OF HACKENSACK

Polls Open/Las Encuestas Se Abren/투표소 개장시간 Tuesday, June 5, 2012
6 A.M. to 8 P.M.
Martes, 5 de junio de 2012
2012년 6월 5일 화요일

©  120



PERMANENT RESIDENT CARD

NAME ROSARIO DE ESTEPAN, ANA MELITA

INS A# 043-497-528

Birthdate 05/22/60 Category FX1 Sex F

Country of Birth Dominican Republic

CARD EXPIRES 01/28/13

Resident Since 06/27/92

C1USA0434975281LIN0219453637<<
6005225F1301287DOM<<<<<<<<<<<2
ROSARIO<DE<ESTEPAN<<ANA<MELITA

T4 P1 *****AUTO**5-DIGIT 07601
119795765
A 05 01
Ana M Estepan
433 Park St
Hackensack NJ 07601-4405

ESTA SOLAPA TIENE ADHESIVO DOBLE POR LA MITAD, HUMEDezca LA TIRA DE ADHESIVO Y CIERRE.

119795765



ANA M ESTEPAN
433 PARK ST
HACKENSACK NJ 07601

K009783

ESTEPAN, ANA M
433 PARK ST

K009783

HACKENSACK

07601

WARD- 5 DISTRICT-01 REGIS-10/03/05

Estado de Nueva Jersey
Comisionados del Registro del Condado

16

Formulario de Registro para Votar

Se debe ser ciudadano de los Estados Unidos y tener por lo menos 18 años de edad a la fecha de las próximas elecciones, además de ser residente de Nueva Jersey de su Condado durante por lo menos 30 días.

El Comisionado de Registros le notificará después de recibir este formulario.

Puede registrarse hasta 29 días antes de la fecha de las próximas elecciones para poder votar en las mismas.

Marque aquí si desea trabajar con la Junta o ser un asistente de elecciones en futuras elecciones.

Marque aquí si está incapacitado en forma permanente, no puede desplazarse al lugar de elecciones y desea recibir información sobre el Voto Ausente.

Firme o Marque

Si el solicitante es incapaz de completar este formulario, imprima el nombre y la dirección de la persona que lo hizo.

| | |
|----|---|
| 1 | Marque según corresponda <input checked="" type="checkbox"/> Registro nuevo <input type="checkbox"/> Cambio de domicilio <input checked="" type="checkbox"/> Cambio de nombre |
| 2 | Apellido <u>ESTEPAN</u> Primer nombre <u>ANA M</u> Inicial <u>20</u> Jr. Sr. <u>II III</u> |
| 3 | Dirección de su domicilio <u>433 PARK HACKENSACK NJ</u> |
| 4 | Ciudad o pueblo <u>03501-04</u> Condado <u>W-5 D-1</u> Código postal |
| 5 | Dirección donde recibe su correspondencia (si fuera distinta de la anterior) |
| 6 | Fecha de nacimiento- Mes, Día, Año <u>5/22/60</u> 7 Número de teléfono (opcional) <u>201 880 4783</u> |
| 8 | Nombre y dirección de su último registro de votante |
| 9 | Declaración - Juro o afirmo que: <ul style="list-style-type: none">Soy ciudadano de los Estados UnidosResido en la dirección indicada anteriormenteTendré por lo menos 18 años de edad a la fecha de las próximas eleccionesNo estoy bajo libertad condicional (parole) o a prueba (probation), ni estoy cumpliendo una sentencia por ser culpable de un delito bajo una ley federal o estatal.Comprendo que un registro falso o fraudulento me hace pasible de una multa de hasta \$1,000, pena de prisión de hasta 5 años o ambas, según R.S. 19:34-1. |
| 10 | Nombre <u>She confirmed that</u> Dirección <u>this is her signature.</u> |

Condado
Solamente para uso oficial
NR 10/3/05 gk
Empleado
E 10/3/05 gk
Registro No.
Sello de hora de la oficina
SEP 29 PM 3:38

DOB 5/22/60

Voter Profile

User Printed: BESOEAD2
Date: 03/30/2017

Voter Information:

Voter's Name: NIKOLAI FARAJIAN
Date of Birth: 03/05/1982
Voter ID: 150682017
Legacy ID:
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit:
Suffix A:
Suffix B:
Street Number: 0-50
Street Name: WALTON RD
Address Line 2:
Address Line 3:
Municipality : FAIR LAWN
Postal City: FAIR LAWN
State: NJ
Zip: 07410

Party Information:

Current Party: Unaffiliated
Party Privilege Date:

Miscellaneous:

Gender: Not Entered
Absentee Ballot Type: None
Registration Date: 01/18/2008
Registration Type: Agency with Identification
Last Action Taken Date: 01/28/2016

Status Information:

Voting Privilege Date:
Current Status: Rejected
Date Last Voted:
Rejected Reason: Not a U.S Citizen/Checked off No to U.S. Citizenship
Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Districts:

| | | | | | | | |
|------------|----|----------|----|---------------|----|-------------|----|
| Ward | 00 | District | 01 | Congressional | 05 | Legislative | 38 |
| Freeholder | | School | | Special | | Fire | |

Previous Residence Addresses:

| Change Date | Street Number | Street Name | Address Line 2 | Address Line 3 | Unit | Municipality | State | Zip Code |
|-------------|---------------|-------------|----------------|----------------|------|--------------|------------|----------|
| 09/11/2015 | 50 | WALTON RD | | | | FAIR LAWN | New Jersey | 07410 |

Election History:

No Records Found for the Election History

Previous Party:

No Records Found for the Previous Party

Previous Name:

| Date Changed | Last Name | First Name | Middle Name | Suffix |
|--------------|-----------|------------|-------------|--------|
| 01/14/2016 | PARAJIAN | NIKOLAI | | |

Registration History:

No Records Found for the Registration History

Main Menu:

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Voter Mail-In Ballot

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Voter DIA

MVC File

Reports

Help

Logout

Compare MVC - Agency

new(deleted) Incomp' 105

BESOEAD2 / B

1/25/16
A

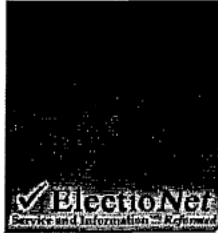
| MVC Voter | | | |
|-------------------------|---|----------------------------------|---|
| Name | NIKOLAI FARAJIAN | Date of Birth | 03/05/1982 |
| Residence Address | 50 WALTON RD FAIR LAWN NJ 07410-5511 | Mailing Address | |
| Driver's License Number | F05335920003822 | Original Driver's License Number | P05335920003822 |
| Card Number | | Previous DOB | 03/05/1982 |
| Previous Name | NIKOLAI FARAJIAN | Previous Address | 50 WALTON RD FAIR LAWN NJ 07410-5511 |
| MVC Transaction Date | 01/14/2016 | | |

MVC Signature Date: 01/14/2016

Reject ☐ English:☒ Spanish:

Reject

No Card Issued



| SVRS Matched Voters | | | | | | | | | | |
|-------------------------------------|-----------|------------------|---------------|-------------------|---|-----------------|-------------------------|-----|-------------------|---------|
| Select | Voter Id | Name | Date of Birth | Registration Date | Residence Address | Mailing Address | Driver's License Number | SSN | Confidence Factor | Status |
| <input checked="" type="checkbox"/> | 150682017 | NIKOLAI FARAJIAN | 03/05/1982 | 09/18/2008 | 0-50 WALTON RD, FAIR LAWN, NJ 07410 | | | | 100 % | Deleted |

* under Status Reason indicates voter has multiple status reasons.

150682017

NIKOLAI FARAJIAN
0-50 WALTON RD
FAIR LAWN NJ 07410

1

Number is matched statewide.

me, DOB (or)

01/01/1800) matched statewide.

me, Soundex of First Name, DOB (including 01/01/1800) matched statewide.

Name matching process includes MVC previous names if there is a name change.

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OK TO REG.
1/22/16 KA



New Jersey Voter Registration Application

76

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

Attn: Kathy/MVC

| | | | | | | |
|---|--|---|--|--|--|---|
| 1 Check boxes that apply: <input type="checkbox"/> New Registration <input checked="" type="checkbox"/> Address Change <input type="checkbox"/> Political Party Affiliation <input type="checkbox"/> Name Change <input checked="" type="checkbox"/> Signature Update or Non-affiliation Change | | | | | | FOR OFFICIAL USE ONLY Clerk 150682017 Registration # Office Time Stamp <input type="checkbox"/> by mail <input type="checkbox"/> in person |
| 2 Are you a U.S. Citizen? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If No, DO NOT complete this form) | | Will you be 18 years of age by the next election? <input type="checkbox"/> Yes <input type="checkbox"/> No (If No, DO NOT complete this form) | | | | |
| 3 Last Name FARAJIAN | | First Name NIKOLAI | | Middle Name or Initial Suffix (Jr., Sr., III) | | |
| 4 Date of Birth 3/5/82 | | | | | | |
| 5 NJ Driver's License Number or MVC Non-driver ID Number F05335920003822 If you DO NOT have a NJ Driver's License or MVC Non-Driver ID, provide the last 4 digits of your Social Security Number. <input type="checkbox"/> "I swear or affirm that I DO NOT have a NJ Driver's License, MVC Non-driver ID or a Social Security Number." | | | | | | |
| 6 Home Address (DO NOT use PO Box) 50 WALTON RD | | Apt. FAIR LAWN | | County NJ | | State Zip Code 07410 |
| 7 Mailing Address if different from above | | Apt. Municipality | | County State Zip Code | | |
| 8 Last Address Registered to Vote (DO NOT use PO Box) | | Apt. Municipality | | County State Zip Code | | |
| 9 Former Name if Making Name Change NIKOLAI PARAJIAN | | a. Day Phone Number (Optional) 201 665 6016 b. E-Mail Address (Optional) NICK.FARAJIAN@GMAIL.COM | | | | |
| 10 Do you wish to declare a political party affiliation? <input type="checkbox"/> Yes, the party name is _____ (Optional) <input checked="" type="checkbox"/> No, I do not wish to be affiliated with any political party. | | | | | | |
| 11 Gender <input type="checkbox"/> Female <input checked="" type="checkbox"/> Male | | Declaration - I swear or affirm that: <input checked="" type="checkbox"/> I am a U.S. Citizen <input checked="" type="checkbox"/> I live at the above address <input checked="" type="checkbox"/> I will be at least 18 years old on or before the next election <input type="checkbox"/> I will have resided in the State and county at least 30 days before the next election <input type="checkbox"/> I am not on parole, probation or serving a sentence due to a conviction for an indictable offense under any federal or state laws <input type="checkbox"/> I understand that any false or fraudulent registration may subject me to a fine of up to \$15,000, imprisonment up to 5 years, or both pursuant to R.S. 19:34-1 | | | | |
| Signature: Sign or mark and date on lines below [Signature] Date 2/3/16 | | | | If applicant is unable to complete this form, print the name and address of individual who completed this form. Name _____ Date _____ Address _____ | | |

Important Instructions for sections 5, 6 and 10

- 5) Registrants who are submitting this form by mail and are unable to vote for the first time: If you do not have any of the information verified, you will be asked to provide a COPY of a current and valid ID to avoid having to provide identification at the polling place. any governmental agency. Any person who uses such numbers
- 6) contact point or the location where you spend most of your time.
- 10) to be unaffiliated, regardless of any prior party affiliation. If you are a party member or become unaffiliated, you must file this form no later than 55 days before the primary election in order to vote in the primary election. Completing section 10 is OPTIONAL and will not affect the acceptance of your voter registration application.

Need More Information? Check boxes below if you would like to receive more information about:

- | | | |
|---|---|--|
| <input type="checkbox"/> voting by mail | <input type="checkbox"/> polling place accessibility | <input type="checkbox"/> available election materials in this alternative language |
| <input type="checkbox"/> becoming a poll worker | <input type="checkbox"/> voting if you have a disability, including visual impairment | |

For further information visit Elections.NJ.gov or call toll-free 1-877-NJVOTER (1-877-658-6837)

Voter Profile

User Printed: BESPTOGU
Date: 03/30/2017

Voter Information:

Voter's Name: ALIREZA FARIDHOSSEINI

Date of Birth: 07/12/1972

Voter ID: 525151388

Legacy ID:

Archived Legacy ID:

Residence Address:

County: BERGEN

Unit: D

Suffix A:

Suffix B:

Street Number: 616

Street Name: GRAND
AVE

Address Line 2:

Address Line 3:

Municipality : LEONIA

Postal City: LEONIA

State: NJ

Zip: 07605

Party Information:

Current Party: Unaffiliated

Party Privilege Date:

Miscellaneous:

Gender: Not Entered

Absentee Ballot Type: None

Registration Date: 12/28/2015

Registration Type: Agency with
Identification

Last Action Taken Date: 01/04/2016

Status Information:

Voting Privilege Date:

Current Status: Rejected

Date Last Voted:

Rejected Reason: Not a U.S Citizen/Checked off No to
U.S. Citizenship

Poll Worker Status:

Mailing Address:

Street Number:

Suffix A:

Suffix B:

Street Name/P.O. Box:

Unit:

Address Line 2:

Address Line 3:

City:

State:

Zip Code:

Country:

Inactive Confirmation Address:

Street Number:

Suffix A:

Suffix B:

Street Name/P.O. Box:

Unit:

Address Line 2:

Address Line 3:

City:

State:

Zip Code:

Country:

Districts:

| | | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|--------------------|----|
| Ward | 00 | District | 06 | Congressional | 09 | Legislative | 37 |
| Freeholder | | School | | Special | | Fire | |

Previous Residence Addresses:

| Change Date | Street Number | Street Name | Address Line 2 | Address Line 3 | Unit | Municipality | State | Zip Code |
|-------------|---------------|--------------------------|----------------|----------------|------|--------------|------------|----------|
| 01/04/2016 | | 316 PROSPECT AVE UNIT 2G | | | | HACKENSACK | New Jersey | 07601 |

Election History:

No Records Found for the Election History

Previous Party:

No Records Found for the Previous Party

Previous Name:

No Records Found for the Previous Name

Registration History:

No Records Found for the Registration History

Main Menu:

Activities

Voter Registration:

Add/Change Voter
Voter With No DOB
Voter Address Change
Confirmation
Voter Address Change
Confirmation Export
MVC - Agency
MVC File Online Voter
Voters who have
Verification / Postal Notice
Verif. and Ack. Card Export
MVC Manual Update

Maintain Voter History

Maintain County Data

Elections

System

Poll Book Printing Schedule

Duplicate Voters

Batch Scanning

Messaging

MVC DL Search

Backend Reporting

Document Imaging

Handheld Scanning

Inquiries

Reports

Help

Logout

Compare MVC - Agency

INCOMP OS BES0EAD2 / B 1/4/16

| MVC Voter | | | |
|-------------------------|---|----------------------------------|--|
| Name | ALIREZA FARIDHOSSEINI | Date of Birth | 07/12/1972 |
| Residence Address | 616 GRAND AVE APT D LEONIA NJ 07605-3115 | Mailing Address | |
| Driver's License Number | F05930250007722 | Original Driver's License Number | F05930250007722 |
| Card Number | | Previous DOB | 07/12/1972 |
| Previous Name | ALIREZA FARIDHOSSEINI | Previous Address | 316 PROSPECT AVE UNIT 2G HACKENSACK NJ 07601-2576 |
| MVC Transaction Date | 12/28/2015 | | |

MVC Signature Date: 12/28/2015

Reject ☐ English:☐ Spanish:

Reject

No Card Issued

| SVRS Matched Voters | | | | | | | | | | |
|---|----------|------|---------------|-------------------|-------------------|-----------------|-------------------------|-----|-------------------|------|
| Select | Voter Id | Name | Date of Birth | Registration Date | Residence Address | Mailing Address | Driver's License Number | SSN | Confidence Factor | Stat |
| No Matching records Found. You can either choose to take No Action, Add or Reject this Motor Voter by clicking on the reject buttons. | | | | | | | | | | |

* under Status Reason indicates voter has multiple status reasons.

Duplicate

Print List

Display Signature

525151388



ALIREZA FARIDHOSSEINI
616 GRAND AVE Apt-Unit D
LEONIA NJ 07605

Matched statewide.

Matched statewide.

of First Name, DOB (including 01/01/1800) matched statewide.
range.



NOT A US Citizen



New Jersey Voter Registration Application

76

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

Attn: Kathy/MVC

| | | | | | | |
|--|--|--|---|--|--|--|
| 1 Check boxes that apply: | | <input type="checkbox"/> New Registration | <input type="checkbox"/> Address Change | <input checked="" type="checkbox"/> Signature Update | <input type="checkbox"/> Political Party Affiliation or Non-affiliation Change | FOR OFFICIAL USE ONLY Clerk Registration # Office Time Stamp |
| 2 Are you a U.S. Citizen? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>Green Card</i> (If No, DO NOT complete this form) | | Will you be 18 years of age by the next election? <input type="checkbox"/> Yes <input type="checkbox"/> No (If No, DO NOT complete this form) | | | | |
| 3 Last Name | | First Name | Middle Name or Initial | Suffix (Jr., Sr., III) | | |
| 4 Date | | | | | | |
| 5 N | | I have a NJ Driver's License or MVC Non-Driver's License or last 4 digits of your Social Security Number. | | | | 525151388 |
| 6 F | | driver ID or a Social Security Number | | | | |
| 7 Mailing Address | | County | State | Zip Code | | 525151388 |
| 8 Last Address Registered to Vote (DO NOT use PO Box) | | County | State | Zip Code | | |
| 9 Former Name if Making Name Change | | a. Day Phone Number (Optional) | | | | <input type="checkbox"/> by mail <input type="checkbox"/> in person |
| | | b. E-Mail Address (Optional) | | | | |
| 10 Do you wish to declare a political party affiliation? (Optional) <input type="checkbox"/> Yes, the party name is _____ <input type="checkbox"/> No, I do not wish to be affiliated with any political party. | | | | | | |
| 11 Gender <input type="checkbox"/> Female <input type="checkbox"/> Male | | Declaration - I swear or affirm that: <input checked="" type="checkbox"/> I am a U.S. Citizen <input checked="" type="checkbox"/> I live at the above address <input checked="" type="checkbox"/> I will be at least 18 years old on or before the next election <input type="checkbox"/> I will have resided in the State and county at least 30 days before the next election <input type="checkbox"/> I am not on parole, probation or serving a sentence due to a conviction for an indictable offense under any federal or state laws <input type="checkbox"/> I understand that any false or fraudulent registration may subject me to a fine of up to \$15,000, imprisonment up to 5 years, or both pursuant to R.S. 19:34-1 | | | | |
| Signature: Sign or mark and date on lines below <i>a GREEN CARD Holder, 1/7/16</i> <i>a permanent Resident</i> | | | | | | If applicant is unable to complete this form, print the name and address of individual who completed this form. Name _____ Date _____ Address _____ |

Important Instructions for sections 5, 6 and 10

- 5) Registrants who are submitting this form by mail and are registering to vote for the first time: If you do not have any of the information required by section 5, or the information you provide cannot be verified, you will be asked to provide a COPY of a current and valid photo ID, or a document with your name and current address on it to avoid having to provide identification at the polling place.

Note: ID Numbers are Confidential and will not be released by any governmental agency. Any person who uses such numbers illegally shall be subject to criminal penalties.

- 6) If you are homeless, you may complete section 6 by providing a contact point or the location where you spend most of your time.

- 10) You may declare a political affiliation or you may declare to be unaffiliated, regardless of any prior party affiliation. Completing section 10 is OPTIONAL and will not affect the acceptance of your voter registration application.

Need More Information? Check boxes below if you would like to receive more information about:

- | | | |
|---|---|---|
| <input type="checkbox"/> voting by mail | <input type="checkbox"/> polling place accessibility | <input type="checkbox"/> available election materials in this alternative language: |
| <input type="checkbox"/> becoming a poll worker | <input type="checkbox"/> voting if you have a disability, including visual impairment | |

For further information visit www.NJElections.org or call toll-free 1-877-NJVOTER (1-877-658-6837)

Voter Profile

User Printed: BESPTOGU
Date: 03/30/2017

Voter Information:

Voter's Name: ANNA FRANZEN
Date of Birth: 02/05/1989
Voter ID: 524799580
Legacy ID:
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit: 1A
Suffix A:
Suffix B:
Street Number: 23
Street Name: BIRCH ST
Address Line 2:
Address Line 3:
Municipality : MIDLAND PARK
Postal City: MIDLAND PARK
State: NJ
Zip: 07432

Party Information:

Current Party: Unaffiliated
Party Privilege Date:

Miscellaneous:

Gender: Not Entered
Absentee Ballot Type: None
Registration Date: 11/07/2015
Registration Type: Agency with Identification
Last Action Taken Date: 12/02/2015

Status Information:

Voting Privilege Date:
Current Status: Rejected
Date Last Voted:
Rejected Reason: Not a U.S Citizen/Checked off No to U.S. Citizenship
Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Districts:

| | | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|--------------------|----|
| Ward | 00 | District | 04 | Congressional | 05 | Legislative | 40 |
| Freeholder | | School | | Special | | Fire | |

Previous Residence Addresses:

| Change Date | Street Number | Street Name | Address Line 2 | Address Line 3 | Unit | Municipality | State | Zip Code |
|-------------|---------------|---------------------|----------------|----------------|------|--------------|------------|----------|
| 12/02/2015 | | 40 EDISON AVE APT E | | | | OAKLAND | New Jersey | 07436 |

Election History:

No Records Found for the Election History

Previous Party:

No Records Found for the Previous Party

Previous Name:

No Records Found for the Previous Name

Registration History:

No Records Found for the Registration History

Main Menu:

Activities

Inquiries

Reports

Report Status
Report Results
Scheduled Reports
Mail-In Ballot
Mail-In Voter Registration Change
Mail-In Voter-Moved Within County
Mail-In Ballot Notification Report
Active/Inactive Voter Report
Alpha Voter List
Alpha List of Challenges Change Detail
Challenger Assignment List
Confirmation Process Status Change Report
County Committee Report
County Contact List
County Street List
Data Export File
Deleted Voters
Detailed Election History
District Sheets
Election Districts Report
Election History Summary
Election Summary
Inactive Through 2 Federal Election Report
Incomplete Reasons Label
Master Street Index w/Poll Location Information
Master Worksheet
Media Report
Motor Voter File Report
NVRA Statistics Report
Office Reports List
Party Declaration Summary
Party Declaration
Pending Voters
Poll Book
Poll Location Report
Poll Worker Data Export
Poll Worker Final Assignment Report
Poll Workers By MWD and Polling Place Report
Poll Worker List and Labels
Proof Reading Labels
Provisional Ballots
Redistricting-Alpha Voter List
Redistricting-Voter Registration Summary
Rejected Reasons
Rejection and Deletion Summary
Sample Ballot
Scanning Report
Signature Export Report
Street Voter List
Surname Analysis
Voter By Street List
Voter History
Voter History Master Export
Voter History Data Export
Voter List with Mailing Address
Voter Registration Summary
Voters Without Signatures
Poll Book Scanning Voter History Error Report
Ward District List
Alpha Voter List w/Poll Place
Remove Sample Ballot Report

Help

Logout

Compare MVC - Agency

I ncomp RS 12/21/15 DESDEAD2 / 8

| MVC voter | | | |
|-------------------------|--|----------------------------------|--|
| Name | ANNA FRANZEN | Date of Birth | 02/05/1989 |
| Residence Address | 23 BIRCH ST APT 1A MIDLAND PK NJ 07432-1718 | Mailing Address | |
| Driver's License Number | F72040470052892 | Original Driver's License Number | F72040470052892 |
| Card Number | | Previous DOB | 02/05/1989 |
| Previous Name | ANNA FRANZEN | Previous Address | 40 EDISON AVE APT E OAKLAND NJ 07436-1303 |
| MVC Transaction Date | 11/07/2015 | | |

MVC Signature Date: 11/07/2015

Reject ☐ English:

Spanish:

Reject

No Card Issued

| SVRS Matched Voters | | | | | | | | | | |
|---|----------|------|---------------|-------------------|-------------------|-----------------|-------------------------|-----|-------------------|------|
| Select | Voter Id | Name | Date of Birth | Registration Date | Residence Address | Mailing Address | Driver's License Number | SSN | Confidence Factor | Stat |
| No Matching records Found. You can either choose to take No Action, Add or Reject this Motor Voter by clicking on the re buttons. | | | | | | | | | | |

* under Status Reason indicates voter has multiple status reasons.

524799580



ANNA FRANZEN
23 BIRCH ST Apt-Unit 1A
MIDLAND PARK NJ 07432

ate Print List Display Signature

bewide.

d statewide.

Name, DOB (including 01/01/1800) matched statewide.



New Jersey


Voter Registration Application

NOT A U.S. CITIZEN!!!

76

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

Attn: Kathy/MVC

| | | | | | | |
|--|--|--|---|--|------------------------------|--|
| 1 Check boxes that apply: | | <input type="checkbox"/> New Registration | <input type="checkbox"/> Address Change | <input type="checkbox"/> Political Party Affiliation | FOR OFFICIAL USE ONLY | |
| | | <input type="checkbox"/> Name Change | <input checked="" type="checkbox"/> Signature Update or Non-affiliation Change | | | |
| 2 Are you a U.S. Citizen? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If No, DO NOT complete this form) | | Will you be 18 years of age by the next election? <input type="checkbox"/> Yes <input type="checkbox"/> No (If No, DO NOT complete this form) | | | Clerk 524799580 | |
| 3 Last Name | First Name | Middle Name or Initial | Suffix (Jr., Sr., III) | Registration # | | |
| 4 Date of Birth | | | | Office Time Stamp | | |
| 5 NJ Driver's License Number or MVC Non-driver ID Number | | | | If you DO NOT have a NJ Driver's License or MVC Non-Driver ID, provide the last 4 digits of your Social Security Number. | | |
| <input type="checkbox"/> "I swear or affirm that I DO NOT have a NJ Driver's License, MVC Non-driver ID or a Social Security Number." | | | | | | |
| 6 Home Address (DO NOT use PO Box) | Apt. | Municipality | County | State | Zip Code | |
| 7 Mailing Address if different from above | Apt. | Municipality | County | State | Zip Code | |
| 8 Last Address Registered to Vote (DO NOT use PO Box) | Apt. | Municipality | County | State | Zip Code | |
| 9 Former Name if Making Name Change | | | | <input type="checkbox"/> by mail <input type="checkbox"/> in person | | |
| | | | | a. Day Phone Number (Optional) _____ | | |
| | | | | b. E-Mail Address (Optional) _____ | | |
| 10 Do you wish to declare a political party affiliation? <input type="checkbox"/> Yes, the party name is _____ (Optional) <input type="checkbox"/> No, I do not wish to be affiliated with any political party. | | | | | | |
| 11 Gender | Declaration - I swear or affirm that: <input type="checkbox"/> Female <input type="checkbox"/> Male • I am a U.S. Citizen • I live at the above address • I will be at least 18 years old on or before the next election • I will have resided in the State and county at least 30 days before the next election • I am not on parole, probation or serving a sentence due to a conviction for an indictable offense under any federal or state laws • I understand that any false or fraudulent registration may subject me to a fine of up to \$15,000, imprisonment up to 5 years, or both pursuant to R.S. 19:34-1 | | | | | |
| Signature: Sign or mark and date on lines below | | | If applicant is unable to complete this form, print the name and address of individual who completed this form. | | | |
| X  Date 12/7/15 | | | Name _____ Date _____ Address _____ | | | |

Important Instructions for sections 5, 6 and 10

5) Registration

524799580


 ANNA FRANZEN
 23 BIRCH ST Apt-Unit 1A
 MIDLAND PARK NJ 07432

6)

10)

g to vote for the first time: If you do not have any of the information verified, you will be asked to provide a COPY of a current and valid it to avoid having to provide identification at the polling place.

any governmental agency. Any person who uses such numbers

contact point or the location where you spend most of your time.

be unaffiliated, regardless of any prior party affiliation. If you are a

55 days before the primary election in order to vote in the primary election. Completing section 10 is OPTIONAL and will not affect the acceptance of your voter registration application.

Need More Information? Check boxes below if you would like to receive more information about:

☐ voting by mail☐ becoming a poll worker☐ polling place accessibility
☐ voting if you have a disability,
 including visual impairment

☐ available election materials in
 this alternative language:

 For further information visit Elections.NJ.gov or call toll-free 1-877-NJVOTER (1-877-658-6837)

Voter Profile

User Printed: BESSPARS
Date: 03/30/2017

Voter Information:

Voter's Name: RYSZARD GAWRONSKI
Date of Birth: 05/15/1959
Voter ID: 151511099
Legacy ID:
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit:
Suffix A:
Suffix B:
Street Number: 15
Street Name: FRANKLIN AVE
Address Line 2:
Address Line 3:
Municipality : WALLINGTON
Postal City: WALLINGTON
State: NJ
Zip: 07057

Party Information:

Current Party: Democratic*
Party Privilege Date:

Miscellaneous:

Gender: Not Entered
Absentee Ballot Type: None
Registration Date: 09/29/2010
Registration Type: Mail-in with Identification
Last Action Taken Date: 10/24/2012

Status Information:

Voting Privilege Date:
Current Status: Rejected
Date Last Voted:
Rejected Reason: Not a U.S Citizen/Checked off No to U.S. Citizenship
Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Districts:

| | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|-----------------------|
| Ward | 00 | District | 06 | Congressional | 09 | Legislative 36 |
| Freeholder | | School | | Special | | Fire |

Previous Residence Addresses:

No Records Found for the Previous Residence Addresses

Election History:

No Records Found for the Election History

Previous Party:

No Records Found for the Previous Party

Previous Name:

No Records Found for the Previous Name

Registration History:

No Records Found for the Registration History

Polling Place:

Next Election Date -- Name
Polling Place

06/06/2017 -- PRIMARY ELECTION
Name
WALLINGTON HIGH SCHOOL LIBRARY

Address
234 MAIN AVE
WALLINGTON NJ 07055



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

nldae-12.5.07



PATRICIA DI COSTANZO
SUPERINTENDENT OF ELECTIONS
COMMISSIONER OF REGISTRATION

151511099



RYSZARD GAWRONSKI
15 FRANKLIN AVE
WALLINGTON NJ 07057

BERGEN COUNTY
SUPERINTENDENT OF ELECTIONS
ONE BERGEN COUNTY PLAZA, ROOM 380
HACKENSACK, N. J. 07601
PHONE: (201) 336-6100
FAX: (201) 336-6111

T 10/24/12
all

THERESA M. O'CONNOR
DEPUTY SUPERINTENDENT OF ELECTIONS
DEPUTY COMMISSIONER OF REGISTRATION

*Not US
Citiz*

Dear Registrant:

Our office received your Voter Registration application and the following was not completed:

*Date of Birth 8/15/1959

*You did not check if you are a US Citizen

Please mark with an X () I am a US Citizen

☒ I am NOT a US Citizen

*You did not sign your application.

Signature 

Print

Please return in the enclosed envelope by October 18, 2012.

Sincerely,

Patricia DiCostanzo
Patricia DiCostanzo
Superintendent of Elections

SUPERINTENDENT
OF ELECTIONS
BERGEN COUNTY, N.J.
2012 OCT 23 PM 12 06

Voter Profile

User Printed: BESPTOGU
Date: 03/30/2017

Voter Information:

Voter's Name: ALEXANDER GIRALDO
Date of Birth: 10/05/1972
Voter ID: 520391193
Legacy ID:
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit:
Suffix A:
Suffix B:
Street Number: 484
Street Name: WALNUT ST
Address Line 2:
Address Line 3:
Municipality : RIDGEFIELD
Postal City: RIDGEFIELD
State: NJ
Zip: 07657

Party Information:

Current Party: Unaffiliated
Party Privilege Date:

Miscellaneous:

Gender: Not Entered
Absentee Ballot Type: None
Registration Date: 06/24/2014
Registration Type: Agency with Identification
Last Action Taken Date: 10/14/2014

Status Information:

Voting Privilege Date:
Current Status: Rejected
Date Last Voted:
Rejected Reason: Not a U.S Citizen/Checked off No to U.S. Citizenship
Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Districts:

| | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|-----------------------|
| Ward | 00 | District | 05 | Congressional | 09 | Legislative 36 |
| Freeholder | | School | | Special | | Fire |

Previous Residence Addresses:

| Change Date | Street Number | Street Name | Address Line 2 | Address Line 3 | Unit | Municipality | State | Zip Code |
|-------------|---------------|--------------------------|----------------|----------------|------|---------------|------------|----------|
| 09/25/2014 | | 5500 JEFFERSON ST 2ND FL | | | | WEST NEW YORK | New Jersey | 07093 |

Election History:

No Records Found for the Election History

Previous Party:

No Records Found for the Previous Party

Previous Name:

No Records Found for the Previous Name

Registration History:

No Records Found for the Registration History

Main Menu:

Activities

Inquiries

Voter Registration

Voter Mail-In Ballot Request

Voter Mail-In Ballot

Voter Election History

Voter Change Audit

Voter Deletions

County Data

Polling Place

Purged Voters

Voter DIA

MVC File

Reports

Help

Logout

Compare MVC - Agency

BESOEAD2 / BERGEN

E/Rodriguez (NS)

| MVC Voter | | | |
|-------------------------|---|----------------------------------|---|
| Name | ALEXANDER GIRALDO | Date of Birth | 10/05/1972 |
| Residence Address | 484 WALNUT ST RIDGEFIELD NJ 07657-2602 | Mailing Address | |
| Driver's License Number | G45890190010722 | Original Driver's License Number | G45890190010722 |
| Card Number | | Previous DOB | 10/05/1972 |
| Previous Name | ALEXANDER GIRALDO | Previous Address | 5500 JEFFERSON ST 2ND FL WEST NEW YORK NJ 07093-4640 |
| MVC Transaction Date | 06/24/2014 | | |

MVC Signature Date: 06/24/2014

Reject ☐ English:☒ Spanish:

Reject

No Card Issued

Reject
Signature
from
Importing

| SVRS Matched Voters | | | | | | | | | | | |
|---|----------|------|---------------|-------------------|-------------------|-----------------|-------------------------|-----|-------------------|--------|---------------|
| Select | Voter Id | Name | Date of Birth | Registration Date | Residence Address | Mailing Address | Driver's License Number | SSN | Confidence Factor | Status | Status Reason |
| No Matching records Found. You can either choose to take No Action, Add or Reject this Motor Voter by clicking on the respective buttons. | | | | | | | | | | | |

* under Status Reason Indicates voter has multiple status reasons.

Note:

If status is blank, that implies the voter status is Active.
 If Confidence Factor is 100 %, that implies Driver's License Number is matched.
 If Confidence Factor is 50 %, that implies Last Name, First Name, DOB (or)
 Last Name, First Name, First Letter of Middle Name and DOB (01/01/1800) m
 If Confidence Factor is 25 %, that implies Soundex of Last Name, Soundex of
 Name matching process includes MVC previous names if there is a name change.

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520391193



ALEXANDER GIRALDO
 484 WALNUT ST
 RIDGEFIELD NJ 07657

NOT A US Citizen

76



New Jersey Voter Registration Application

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

| | | | |
|--|---|---|--|
| 1 Check boxes that apply: <input type="checkbox"/> New Registration <input type="checkbox"/> Address Change <input checked="" type="checkbox"/> Signature Update <input type="checkbox"/> Political Party Affiliation or Non-affiliation Change | | FOR OFFICIAL USE ONLY Clerk <u>Kathy</u> Registration # <u>DM</u> Office Time Stamp <u>5:00 391 193</u> | |
| 2 Are you a U.S. Citizen? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If No, DO NOT complete this form) | | Will you be 18 years of age by the next election? <input type="checkbox"/> Yes <input type="checkbox"/> No (If No, DO NOT complete this form) | |
| 3 Last Name <u>Giraldo</u> | | First Name <u>Alexander</u> | Middle Name or Initial _____ Suffix (Jr., Sr., III) _____ |
| 4 Date of Birth _____ | | 5 NJ Driver's License Number or MVC Non-driver ID Number _____ If you DO NOT have a NJ Driver's License or MVC Non-Driver ID, provide the last 4 digits of your Social Security Number. _____ | |
| <input type="checkbox"/> "I swear or affirm that I DO NOT have a NJ Driver's License, MVC Non-driver ID or a Social Security Number." | | | |
| 6 Home Address (DO NOT use PO Box) <u>484 Walnut Street</u> | | Apt. _____ | Municipality <u>Ridgefield</u> |
| 7 Mailing Address if different from above _____ | | Apt. _____ | Municipality _____ |
| 8 Last Address Registered to Vote (DO NOT use PO Box) _____ | | Apt. _____ | Municipality _____ |
| 9 Former Name if Making Name Change _____ | | a. Day Phone Number (Optional) _____ b. E-Mail Address (Optional) _____ | |
| 10 Do you wish to declare a political party affiliation? (Optional) | | <input type="checkbox"/> Yes, the party name is _____ <input type="checkbox"/> No, I do not wish to be affiliated with any political party. | |
| 11 Gender <input type="checkbox"/> Female <input type="checkbox"/> Male | Declaration - I swear or affirm that: <input checked="" type="checkbox"/> I am a U.S. Citizen <input checked="" type="checkbox"/> I live at the above address <input checked="" type="checkbox"/> I will be at least 18 years old on or before the next election | | |
| Signature: Sign or mark and date on lines below _____ Date _____ | | | |
| If applicant is unable to complete this form, print the name and address of individual who completed this form. Name _____ Date _____ Address _____ | | | |

Important Instructions for sections 5, 6 and 10

- 5) Registrants who are submitting this form by mail and are registering to vote for the first time: If you do not have any of the following information, you will be asked to provide a COPY of a current address on it to avoid having to provide identification at the time of registration.

520391193



ALEXANDER GIRALDO
484 WALNUT ST
RIDGEFIELD NJ 07657

used by any governmental agency. Any person who uses such information for any purpose other than the purpose for which it was collected is in violation of the law.

section 10 is OPTIONAL and will not affect the acceptance of your voter registration application.

Need More Information? Check boxes below if you would like to receive more information about:

- | | | |
|---|---|---|
| <input type="checkbox"/> voting by mail | <input type="checkbox"/> polling place accessibility | <input type="checkbox"/> available election materials in this alternative language: |
| <input type="checkbox"/> becoming a poll worker | <input type="checkbox"/> voting if you have a disability, including visual impairment | |

For further information visit www.NJElections.org or call toll-free 1-877-NJVOTER (1-877-658-6837)

Voter Profile

User Printed: BESOEAD2
Date: 03/29/2017

Voter Information:

Voter's Name: LORNA M GOODEN
Date of Birth: 05/31/1966
Voter ID: 119314189
Legacy ID: J367361
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit:
Suffix A:
Suffix B:
Street Number: 37
Street Name: E FOREST AVE
Address Line 2:
Address Line 3:
Municipality : TEANECK
Postal City: TEANECK
State: NJ
Zip: 07666

Party Information:

Current Party: Unaffiliated
Party Privilege Date:

Miscellaneous:

Gender: Female
Absentee Ballot Type: None
Registration Date: 04/21/1988
Registration Type: Mail-in without Identification
Last Action Taken Date: 05/13/2014

Status Information:

Voting Privilege Date: 05/20/1988
Current Status: Deleted
Date Last Voted: 05/11/2010
Deleted Date: 05/13/2014
Deleted Reason: Administrative Action
Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Districts:

| | | | | | | | |
|------------|----|----------|----|---------------|----|-------------|----|
| Ward | 00 | District | 23 | Congressional | 09 | Legislative | 37 |
| Freeholder | | School | | Special | | Fire | |

Previous Residence Addresses:

No Records Found for the Previous Residence Addresses

Election History:

| Election Date & Name | Election Type | Election Code | Ballot Type | County Voted In | Municipality Voted In | Party Affiliation | Memo | User Scanned | Date Scanned | Date Counted | Ballot Status |
|-----------------------------------|---------------|---------------------|-------------|-----------------|-----------------------|-------------------|------|--------------|--------------|--------------|---------------|
| 05/11/2010- MAY MUNICIPAL | Municipal | MAHW RDWD TEAN TETR | Machine | BERGEN | TEANECK | | | BESCPowe | 06/05/2010 | 05/11/2010 | |
| 04/20/2010- STATE-SCHOOL ELECTION | Annual School | STATESCHOOL10 | Machine | BERGEN | TEANECK | | | BESOEAADM | 04/29/2010 | 04/20/2010 | |
| 11/04/1997- GENERAL 11/04/1997 | General | 00040 | Machine | BERGEN | UNKNOWN | | | CONV | 01/01/1997 | 11/04/1997 | |
| 11/05/1996- GENERAL 11/05/1996 | General | 00040 | Machine | BERGEN | UNKNOWN | | | CONV | 01/01/1996 | 11/05/1996 | |
| 01/01/1996- 1996M | Municipal | 00019 | Machine | BERGEN | UNKNOWN | | | CONV | 01/01/1996 | 01/01/1996 | |
| 11/02/1993- GENERAL 11/02/1993 | General | 00040 | Machine | BERGEN | UNKNOWN | | | CONV | 01/01/1993 | 11/02/1993 | |
| 06/08/1993- PRIMARY 06/08/1993 | Primary | 00040 | Machine | BERGEN | UNKNOWN | Democratic* | | CONV | 01/01/1993 | 06/08/1993 | |
| 11/03/1992- GENERAL 11/03/1992 | General | 00040 | Machine | BERGEN | UNKNOWN | | | CONV | 01/01/1992 | 11/03/1992 | |

| | | | | | |
|--|-------|------------------------|-------------|------|-----------------------|
| 06/02/1992- Primary PRIMARY 06/02/1992 | 00040 | Machine BERGEN UNKNOWN | Democratic* | CONV | 01/01/1992 06/02/1992 |
| 11/08/1988- General GENERAL 11/08/1988 | 00040 | Machine BERGEN UNKNOWN | | CONV | 01/01/1988 11/08/1988 |
| 06/07/1988- Primary PRIMARY 06/07/1988 | 00040 | Machine BERGEN UNKNOWN | Democratic* | CONV | 01/01/1988 06/07/1988 |

Previous Party:
Date Changed
03/17/1993

Party Privilege Date

Party Name
Democratic*

Previous Name:
No Records Found for the Previous Name

Registration History:
No Records Found for the Registration History

Miscellaneous Memo

**BESOEAD2 /
BERGEN**

Memo :

NOT A US CITIZEN

Close



BERGEN COUNTY
SUPERINTENDENT OF ELECTIONS
ONE BERGEN COUNTY PLAZA, ROOM 380
HACKENSACK, N. J. 07601
PHONE: (201) 336-6100
FAX: (201) 336-6111

PATRICIA DI COSTANZO
SUPERINTENDENT OF ELECTIONS
COMMISSIONER OF REGISTRATION

THERESA M. O'CONNOR
DEPUTY SUPERINTENDENT OF ELECTIONS
DEPUTY COMMISSIONER OF REGISTRATION

May 13, 2014

119314189



LORNA M GOODEN
37 E FOREST AVE
TEANECK NJ 07666

Lorna M. Gooden
37 E Forest Avenue
Teaneck, NJ 07666

DOB: 05/31/1966

Lorna M. Gooden registered to vote 04/21/1988.

Ms. Gooden voted in eleven elections.

A certified copy of her voter profile, showing she was removed from the rolls, per her request, is enclosed.

If you have any questions, please do not hesitate to call this office.

Sincerely,

Patricia DiCostanzo
Superintendent of Elections

Voter Profile

User Printed: BESLAPRI
Date: 05/13/2014

Voter Information:

Voter's Name: LORNA M GOODEN
Date of Birth: 05/31/1966
Voter ID: 119314189
Legacy ID: J367361
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit:
Suffix A:
Suffix B:
Street Number: 37
Street Name: E FOREST AVE
Address Line 2:
Address Line 3:
Municipality : TEANECK
Postal City: TEANECK
State: NJ
Zip: 07666

Party Information:

Current Party: Unaffiliated
Party Privilege Date:

Miscellaneous:

Gender: Female
Absentee Ballot Type: None
Registration Date: 04/21/1988
Registration Type: Mail-in without Identification
Last Action Taken Date: 06/05/2010

Status Information:

Voting Privilege Date: 05/20/1988
Current Status: Active
Date Last Voted: 05/11/2010
Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Districts:

| | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|-----------------------|
| Ward | 00 | District | 23 | Congressional | 09 | Legislative 37 |
| Freeholder | | School | | Special | | Fire |

Previous Residence Addresses:

No Records Found for the Previous Residence Addresses

Election History:

| Election Date & Name | Election Type | Election Code | Ballot Type | County Voted In | Municipality Voted In | Party Affiliation | Memo User Scanned | Date Scanned | Date Counted | Ballot Status |
|-----------------------------------|---------------|---------------------|-------------|-----------------|-----------------------|-------------------|-------------------|--------------|--------------|---------------|
| 05/11/2010- MAY MUNICIPAL | Municipal | MAHW RDWD TEAN TETR | Machine | BERGEN | TEANECK | | BESCPowe | 06/05/2010 | 05/11/2010 | |
| 04/20/2010- STATE-SCHOOL ELECTION | School | STATESCHOOL10 | Machine | BERGEN | TEANECK | | BESOEADM | 04/29/2010 | 04/20/2010 | |
| 11/04/1997- GENERAL | General | 00040 | Machine | BERGEN | UNKNOWN | | CONV | 01/01/1997 | 11/04/1997 | |
| 11/05/1996- GENERAL | General | 00040 | Machine | BERGEN | UNKNOWN | | CONV | 01/01/1996 | 11/05/1996 | |
| 01/01/1996- 1996M | Municipal | 00019 | Machine | BERGEN | UNKNOWN | | CONV | 01/01/1996 | 01/01/1996 | |
| 11/02/1993- GENERAL | General | 00040 | Machine | BERGEN | UNKNOWN | | CONV | 01/01/1993 | 11/02/1993 | |
| 06/08/1993- PRIMARY | Primary | 00040 | Machine | BERGEN | UNKNOWN | Democratic* | CONV | 01/01/1993 | 06/08/1993 | |
| 11/03/1992- GENERAL | General | 00040 | Machine | BERGEN | UNKNOWN | | CONV | 01/01/1992 | 11/03/1992 | |

4/29/14

I Lorna Gooden DOB 5/31/1966
Residing at 39 E. Forest Ave
Teaneck NJ 07666.

Would like to be removed
from Voter records

Thank You

[REDACTED]

Lorna Gooden

2014 APR 29 AM 9 11

SUPERINTENDENT
OF ELECTIONS
BERGEN COUNTY, N.J.

Voter Profile

*Deleted
Not a U.S. Citizen
5/13/14
celebrity*

User Printed: BESOEAD2
Date: 04/29/2014

Voter Information:

Voter's Name: LORNA M GOODEN
Date of Birth: **05/31/1966**
Voter ID: 119314189
Legacy ID: J367361
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit:
Suffix A:
Suffix B:
Street Number: 37
Street Name: E FOREST AVE
Address Line 2:
Address Line 3:
Municipality: TEANECK
Postal City: TEANECK
State: NJ
Zip: 07666

Party Information:

Current Party: Unaffiliated
Party Privilege Date:

Miscellaneous:

Gender: Female
Absentee Ballot Type: None
Registration Date: 04/21/1988
Registration Type: Mail-in without Identification
Last Action Taken Date: 06/05/2010

Status Information:

Voting Privilege Date: 05/20/1988
Current Status: Active
Date Last Voted: 05/11/2010
Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:

119314189



LORNA M GOODEN
37 E FOREST AVE
TEANECK NJ 07666

Districts:

| Ward | District | Congressional | Legislative |
|------------|----------|---------------|-------------|
| 00 | 23 | 09 | 37 |
| Freeholder | School | Special | Fire |

Previous Residence Addresses:

No Records Found for the Previous Residence Addresses

Election History:

| Election Date & Name | Election Type | Election Code | Ballot Type | County Voted In | Municipality Voted In | Party Affiliation | Memo User Scanned | Date Scanned | Date Counted | Ballot Status |
|-----------------------------------|---------------|---------------------|-------------|-----------------|-----------------------|-------------------|-------------------|--------------|--------------|---------------|
| 05/11/2010- MAY MUNICIPAL | Municipal | MAHW RDWD TEAN TETR | Machine | BERGEN | TEANECK | | BESCPowe | 06/05/2010 | 05/11/2010 | |
| 04/20/2010- STATE-SCHOOL ELECTION | Annual School | STATESCHOOL10 | Machine | BERGEN | TEANECK | | BESOEADM | 04/29/2010 | 04/20/2010 | |
| 11/04/1997- GENERAL | General | 00040 | Machine | BERGEN | UNKNOWN | | CONV | 01/01/1997 | 11/04/1997 | |
| 11/04/1997 | | | | | | | | | | |
| 11/05/1996- GENERAL | General | 00040 | Machine | BERGEN | UNKNOWN | | CONV | 01/01/1996 | 11/05/1996 | |
| 11/05/1996 | | | | | | | | | | |
| 01/01/1996- 1996M | Municipal | 00019 | Machine | BERGEN | UNKNOWN | | CONV | 01/01/1996 | 01/01/1996 | |
| 11/02/1993- GENERAL | General | 00040 | Machine | BERGEN | UNKNOWN | | CONV | 01/01/1993 | 11/02/1993 | |
| 11/02/1993 | | | | | | | | | | |
| 06/08/1993- Primary | Primary | 00040 | Machine | BERGEN | UNKNOWN | Democratic* | CONV | 01/01/1993 | 06/08/1993 | |

Voter Profile

User Printed: BESPTOGU
Date: 03/30/2017

Voter Information:

Voter's Name: MARY L GUTIERREZ
Date of Birth: 02/24/1982
Voter ID: 119698462
Legacy ID: J895572
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit: 1
Suffix A:
Suffix B:
Street Number: 94
Street Name: WESSINGTON AVE
Address Line 2:
Address Line 3:
Municipality : GARFIELD
Postal City: GARFIELD
State: NJ
Zip: 07026

Party Information:

Current Party: Unaffiliated
Party Privilege Date:

Miscellaneous:

Gender: Female
Absentee Ballot Type: None
Registration Date: 09/05/2002
Registration Type: Agency with Identification
Last Action Taken Date: 10/12/2011

Status Information:

Voting Privilege Date:
Current Status: Rejected
Date Last Voted: 11/04/2008
Rejected Reason: Not a U.S Citizen/Checked off No to U.S. Citizenship
Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Districts:

| | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|-----------------------|
| Ward | 02 | District | 01 | Congressional | 09 | Legislative 35 |
| Freeholder | | School | | Special | | Fire |

Previous Residence Addresses:

No Records Found for the Previous Residence Addresses

Election History:

| Election Date & Name | Election Type | Election Code | Ballot Type | County Voted In | Municipality Voted In | Party Affiliation | Memo User | Date Scanned | Date Counted | Ballot Status |
|-------------------------------|---------------|---------------|-------------|-----------------|-----------------------|-------------------|-----------|--------------|--------------|---------------|
| 11/04/2008-GENERAL ELECTION | General | 00004 | Machine | BERGEN | GARFIELD | | BESOEADM | 12/04/2008 | 11/04/2008 | |
| 11/02/2004-GENERAL 11/02/2004 | General | 00040 | Machine | BERGEN | UNKNOWN | | CONV | 01/01/2004 | 11/02/2004 | |

Previous Party:

No Records Found for the Previous Party

Previous Name:

No Records Found for the Previous Name

Registration History:

No Records Found for the Registration History

Permanent Registration J 895572
(ORIGINAL)

CHANGE IN ADDRE



State of New Jersey
County Commissioners of Registration

58 76

Voter Registration Application

| | | | | |
|----|---|--------------------|--|-------------------|
| 1 | Check one: <input checked="" type="checkbox"/> New Registration <input type="checkbox"/> Address Change <input type="checkbox"/> Name Change | | | |
| 2 | Last Name Gutierrez | First Name Mary | Middle Initial L | Jr. Sr. II III |
| 3 | Street Address Where You Live 94 Wessington Ave. | | | Apt. # 1 |
| 4 | City or Town Garfield | County Passaic | Zip Code 07026 | |
| 5 | Address Where You Get Your Mail (if different from above) - | | | |
| 6 | Date of Birth- Month, Day, Year 02/24/87 | | 7 Telephone Number (optional) | |
| 8 | Name And Address Of Your Last Voter Registration | | | |
| | Declaration - I swear or affirm that: • I am a U.S. citizen • I live at the above address 119698462 | | For Office Use Only MR Clerk 9/5/88 FT Registration No. Office Time Stamp COMMISSIONER OF REGISTRATIONS | |
| 10 | Name Address | | Date 38 10 56 AM '02 | |

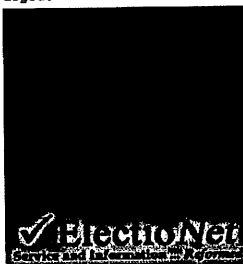
MARY L GUTIERREZ
94 WESSINGTON AVE Apt-Unit 1
GARFIELD NJ 07026

Activities

Inquiries

Voter Registration
 Voter Mail-In Ballot Request
 Voter Mail-In Ballot
 Voter Election History
 Voter Change Audit
 Voter Deletions
 County Data
 Polling Place
 Purged Voters
 Voter DIA
 MVC File

Reports
 Help
 Logout



Compare MVC File With SVRS

BESOEAD2 /
 BERGEN

| MVC Voter | | | |
|-------------------------|--|----------------------------------|---|
| Name | MARY L GUTIERREZ-RIVERO | Date of Birth | 02/24/1982 |
| Residence Address | 94 WESSINGTON AVE. GARFIELD NJ 07026-3208 | Mailing Address | |
| Driver's License Number | G94835277352822 | Original Driver's License Number | G94835277352822 |
| Card Number | | Previous DOB | 02/24/1982 |
| Party | | | |
| Previous Name | MARY L GUTIERREZ-RIVERO | Previous Address | 17 5TH ST APT B7 PASSAIC NJ 07055-8046 |
| MVC Transaction Date | 03/11/2011 | | |

| SVRS Matched Voters | | | | | | | | | | |
|---------------------|------------------|---------------|-------------------|---|-------------------------------------|-------------------------|-------|-----|-------------------|---------|
| Voter Id | Name | Date of Birth | Registration Date | Residence Address | Mailing Address | Driver's License Number | Party | SSN | Confidence Factor | Status |
| 119698462 | MARY L GUTIERREZ | 02/24/1982 | 09/05/2002 | 94 WESSINGTON AVE, Apt-Unit 1, GARFIELD, NJ 07026 | | G94835277352822 | UNA | | 25 % | |
| 114116394 | MARIA GUTIERREZ | 01/01/1800 | 10/07/1988 | 36 CRANBERRY CT, MIDDLETOWN, NJ 07701 | 36 CRANBERRY CT, RED BANK, NJ 07701 | | DEM | | 25 % | Deleted |
| 121010636 | MARIE E GOODRICH | 01/01/1800 | 09/25/1947 | 325 20TH AVE, PATERSON, NJ 07513 | | | REP | | 25 % | Deleted |
| 121074369 | MARY GITTERS | 01/01/1800 | 09/13/1976 | 346 E 34TH ST, PATERSON, NJ 07504 | | | DEM | | 25 % | Deleted |
| 115146727 | MARY GOODRICH | 01/01/1800 | 09/30/1977 | 43 MOUNTAIN RD, ROCKAWAY BOROUGH, NJ 07866 | | | UNA | | 25 % | Deleted |

Note:

If status is blank, that implies the voter status is Active.

If Confidence Factor is 100 %, that implies Driver's License Number is matched statewide.

If Confidence Factor is 50 %, that implies Last Name, First Name, DOB (or)

Last Name, First Name, First Letter of Middle Name and DOB (01/01/1800) matched statewide.

If Confidence Factor is 25 %, that implies Soundex of Last Name, Soundex of First Name, DOB (including 01/01/1800) matched statewide.

Name matching process includes MVC previous names if there is a name change.

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1.5.0

119698462



MARY L GUTIERREZ
 94 WESSINGTON AVE Apt-Unit 1
 GARFIELD NJ 07026

Dup of 119698462

WFNJ-11 5/31/00 (Reformatted 9/10/2002) PAGE 15 of 19

76



New Jersey Voter Registration Application

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

| | | | |
|--|--|--|---|
| Check boxes that apply: <input type="checkbox"/> New Registration <input type="checkbox"/> Name Change <input type="checkbox"/> Address Change <input type="checkbox"/> Signature Update <input type="checkbox"/> Political Party Affiliation or Non-affiliation Change | | FOR OFFICIAL USE ONLY | |
| Are you a U.S. Citizen? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If No, DO NOT complete this form) | | Will you be 18 years of age by the next election? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If No, DO NOT complete this form) | |
| Last Name: <u>Gutierrez</u> | | First Name: <u>Mary</u> | Middle Name or Initial: <u>L.</u> |
| Date of Birth: <u>02/24/1982</u> | | Suffix (Jr., Sr., III) | |
| NJ Driver's License Number or MVC Non-driver ID Number: <u>694885277352822</u> | | If you DO NOT have a NJ Driver's License or MVC Non-Driver ID, provide the last 4 digits of your Social Security Number: _____ | |
| <input type="checkbox"/> I swear or affirm that I DO NOT have a NJ Driver's License, MVC Non-driver ID or a Social Security Number | | | |
| Home Address (DO NOT use PO Box): <u>94 Wessington Ave.</u> | | Apt.: <u>1flr.</u> | Municipality: <u>Bergen</u> State: <u>NJ</u> Zip Code: <u>07026</u> |
| Mailing Address (if different from above): | | Apt. | Municipality County State Zip Code |
| Last Address Registered to Vote (DO NOT use PO Box) | | Apt. | Municipality County State Zip Code |
| Former Name (if Making Name Change) | | a. Day Phone Number (Optional): <u>(262) 600-1383</u> | |
| | | b. E-Mail Address (Optional): | |
| Do you wish to declare a political party affiliation? <input type="checkbox"/> Yes, the party name is _____ <input checked="" type="checkbox"/> No, I do not wish to be affiliated with any political party. | | | |
| Gender: <input checked="" type="checkbox"/> Female <input type="checkbox"/> Male | | I understand that any false or fraudulent registration may subject me to a fine of up to \$15,000, imprisonment up to 5 years, or both, pursuant to R.S. 18:24-1 | |
| Declaration: I swear or affirm that: • I am a U.S. Citizen • I live at the above address • I am at least 18 years old on or before the next election | | • I will have resided in the State and county at least 30 days before the next election • I am not on parole, probation or serving a sentence due to a conviction for an indictable offense under any federal or state laws | |
| Signature: Sign or mark and write on lines below | | If applicant is unable to complete this form, print the name and address of individual who completed this form: | |
| | | Name: _____ Date: _____ Address: _____ | |

119698462



MARY L. GUTIERREZ
94 WESSINGTON AVE Apt-Unit 1
GARFIELD NJ 07026

5, 6 and 10

registering to vote for the first time. If you do not have any of the above information, you will be asked to provide a COPY of a valid and current address on it to avoid having to provide

used by any governmental agency. Any person who uses such information for any purpose other than that for which it was collected may be subject to criminal and civil penalties.

providing a contact point or the location where you spend most of your time.

10) You may declare a political affiliation or you may declare to be unaffiliated, regardless of any prior party affiliation. Completing section 10 is OPTIONAL and will not affect the acceptance of your voter registration application.

Need More Information? Check boxes below if you would like to receive more information about:

☐ voting by mail
☐ becoming a poll worker

☐ polling place accessibility
☐ voting if you have a disability, including visual impairment

☐ available election materials in this alternative language:

For further information visit Elections.NJ.gov or call toll-free 1-877-NJVOTER (1-877-658-6837)

NJ Division of Elections - 6/22/06

Permanent Registration J 895572
(ORIGINAL)


CHANGE IN ADDRESS



State of New Jersey
County Commissioners of Registration

58 76

Voter Registration Application

| | | | |
|---|---|--|------------------------------------|
| 1 | Check one: <input checked="" type="checkbox"/> New Registration <input type="checkbox"/> Address Change <input type="checkbox"/> Name Change | | |
| 2 | Last Name Gutierrez | First Name Mary | Middle Initial Jr. Sr. L II III |
| 3 | Street Address Where You Live 94 Wessington Ave. | | Apt. # 1 |
| 4 | City or Town Garfield 2-1 | County Passaic | Zip Code 07026 |
| 5 | Address Where You Get Your Mail (if different from above) | | |
| 6 | Date of Birth- Month, Day, Year 02/24/87 | | 7 Telephone Number (optional) |
| 8 | Name And Address Of Your Last Voter Registration | | |
| Declaration - I swear or affirm that: • I am a U.S. citizen 119698462  MARY L GUTIERREZ 94 WESSINGTON AVE Apt-Unit 1 GARFIELD NJ 07026 | | For Office Use Only NR Clerk 9/5/08 PT Registration No. Office Time Stamp COMMISSIONER OF REGISTRATIONS Date 3-21-16 10:56 AM '16 | |
| 10 | Name Address | | |

Appt. scheduled
11:00 am 3/22/16

3-21-16 10:44 am mjs
11 am 3-21-16 ✓



BERGEN COUNTY
SUPERINTENDENT OF ELECTIONS
ONE BERGEN COUNTY PLAZA, ROOM 380
HACKENSACK, N. J. 07601
PHONE: (201) 336-6100
FAX: (201) 336-6111

PATRICIA DI COSTANZO
SUPERINTENDENT OF ELECTIONS
COMMISSIONER OF REGISTRATION

THERESA M. O'CONNOR
DEPUTY SUPERINTENDENT OF ELECTIONS
DEPUTY COMMISSIONER OF REGISTRATION

March 24, 2016

Mary L. Gutierrez
94 Wessington Avenue #1
Garfield, NJ 07026

DOB: 02/24/1982

Dear Ms. Gutierrez:

You registered to vote September 5, 2002 on a voter registration application. On March 11, 2011, you went to Motor Vehicle and had them forward your information to us for voting purposes.

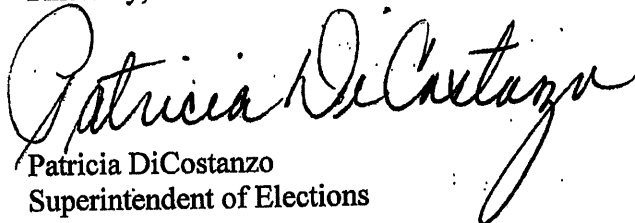
On October 23, 2014, a new voter registration application was received in this office from you stating you were not a U.S. Citizen.

Your record reflects that you voted in both the General 2004 and General 2008 elections.

A certified copy of your voter profile, showing you were removed from the rolls March 24, 2016, per your request, is enclosed.

If you have any questions, please do not hesitate to call this office.

Sincerely,


Patricia DiCostanzo
Superintendent of Elections

119698462



MARY L GUTIERREZ
94 WESSINGTON AVE Apt-Unit 1
GARFIELD NJ 07026

Voter Profile

User Printed: BESOEAD2
Date: 03/30/2017

Voter Information:

Voter's Name: JI W HAN
Date of Birth: 09/13/1973
Voter ID: 525080433
Legacy ID:
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit:
Suffix A:
Suffix B:
Street Number: 164
Street Name: HERBERT AVE
Address Line 2:
Address Line 3:
Municipality : CLOSTER
Postal City: CLOSTER
State: NJ
Zip: 07624

Party Information:

Current Party: Unaffiliated
Party Privilege Date:

Miscellaneous:

Gender: Not Entered
Absentee Ballot Type: None
Registration Date: 12/08/2015
Registration Type: Agency with Identification
Last Action Taken Date: 12/22/2015

Status Information:

Voting Privilege Date:
Current Status: Rejected
Date Last Voted:
Rejected Reason: Not a U.S Citizen/Checked off No to U.S. Citizenship
Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Districts:

| | | | | | | | |
|------------|----|----------|----|---------------|----|-------------|----|
| Ward | 00 | District | 02 | Congressional | 05 | Legislative | 39 |
| Freeholder | | School | | Special | | Fire | |

Previous Residence Addresses:

| Change Date | Street Number | Street Name | Address Line 2 | Address Line 3 | Unit | Municipality | State | Zip Code |
|-------------|---------------|---------------|----------------|----------------|------|--------------|------------|----------|
| 12/22/2015 | | 38 5TH STREET | | | | CLOSTER | New Jersey | 07624 |

Election History:

No Records Found for the Election History

Previous Party:

No Records Found for the Previous Party

Previous Name:

No Records Found for the Previous Name

Registration History:

No Records Found for the Registration History

Motor Voter - Agency

Page 1 of 1

Main Menu:

Activities

Voter Registration

Add/Change Voter

Voter With No DOB

Voter Address Change

Confirmation

Voter Address Change

Confirmation Export

MVC - Agency

MVC File Online Voter

Voters who have

Verification / Postal Notice

Verif. and Ack. Card Export

MVC Manual Update

Maintain Voter History

Maintain County Data

Elections

System

Poll Book Printing Schedule

Duplicate Voters

Batch Scanning

Messaging

MVC DL Search

Backend Reporting

Document Imaging

Handheld Scanning

Inquiries

Reports

Help

Logout

Compare MVC - Agency

INCOMP NS 12/22/15 BESOEAD2 / B

| MVC Voter | | | |
|-------------------------|---|----------------------------------|--|
| Name | JI W HAN | Date of Birth | 09/13/1973 |
| Residence Address | 164 HERBERT AVENUE CLOSTER NJ 07624-1300 | Mailing Address | |
| Driver's License Number | H03784018659732 | Original Driver's License Number | H03784018659732 |
| Card Number | | Previous DOB | 09/13/1973 |
| Previous Name | JI W HAN | Previous Address | 38 5TH STREET CLOSTER NJ 07624-3123 |
| MVC Transaction Date | 12/08/2015 | | |

MVC Signature Date: 12/08/2015

Reject ☐ English:

☒ Spanish:

Reject

No Card Issued

| SVRS Matched Voters | | | | | | | | | | |
|---|----------|------|---------------|-------------------|-------------------|-----------------|-------------------------|-----|-------------------|------|
| Select | Voter Id | Name | Date of Birth | Registration Date | Residence Address | Mailing Address | Driver's License Number | SSN | Confidence Factor | Stat |
| No Matching records Found. You can either choose to take No Action, Add or Reject this Motor Voter by clicking on the re buttons. | | | | | | | | | | |

* under Status Reason indicates voter has multiple status reasons.

Duplicate

Print List

Display Signature

525080433

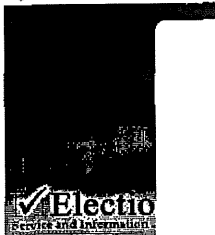


JI W HAN
164 HERBERT AVE
CLOSTER NJ 07624

hed statewide.

matched statewide.

of First Name, DOB (including 01/01/1800) matched statewide.
ange.





New Jersey Voter Registration Application

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

| | | | | | | | |
|--|--|--|---|--|---|--|--|
| 1 Check boxes that apply: | | <input type="checkbox"/> New Registration | <input type="checkbox"/> Address Change | <input type="checkbox"/> Political Party Affiliation or Non-affiliation Change | FOR OFFICIAL USE ONLY Clerk Attn: Kathy MVC Registration # 5800433 Office Time Stamp | | |
| 2 Are you a U.S. Citizen? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If No, DO NOT complete this form) | | Will you be 18 years of age by the next election? <input type="checkbox"/> Yes <input type="checkbox"/> No (If No, DO NOT complete this form) | | | | | |
| 3 Last Name | | Middle Name or Initial | | Suffix (Jr., Sr., III) | | | |
| 4 Date | | 5 NJC | | 6 Hor | | | |
| 7 Mailing Address if different from above | | 8 Last Address Registered to Vote (DO NOT use PO Box) | | 9 Former Name if Making Name Change | | | |
| 10 Do you wish to declare a political party affiliation? (Optional) | | 11 Gender | | 12 Declaration - I swear or affirm that: | | | |
| <input type="checkbox"/> Yes, the party name is _____ <input type="checkbox"/> No, I do not wish to be affiliated with any political party. | | <input type="checkbox"/> Female <input type="checkbox"/> Male | | <input type="checkbox"/> I am a U.S. Citizen <input type="checkbox"/> I live at the above address <input type="checkbox"/> I will be at least 18 years old on or before the next election | | | |
| Signature: Sign or mark and date on lines below _____ Date _____ | | If applicant is unable to complete this form, print the name and address of individual who completed this form. Name _____ Date _____ Address _____ | | 13 Declaration - I will have resided in the State and county at least 30 days before the next election 14 Declaration - I am not on parole, probation or serving a sentence due to a conviction for an indictable offense under any federal or state laws 15 Declaration - I understand that any false or fraudulent registration may subject me to a fine of up to \$15,000, imprisonment up to 5 years, or both pursuant to R.S. 19:34-1 | | | |

Important Instructions for sections 5, 6 and 10

- 5) Registrants who are submitting this form by mail and are registering to vote for the first time: If you do not have any of the information required by section 5, or the information you provide cannot be verified, you will be asked to provide a COPY of a current and valid photo ID, or a document with your name and current address on it to avoid having to provide identification at the polling place.

Note: ID Numbers are Confidential and will not be released by any governmental agency. Any person who uses such numbers illegally shall be subject to criminal penalties.

- 6) If you are homeless, you may complete section 6 by providing a contact point or the location where you spend most of your time.
- 10) You may declare a political affiliation or you may declare to be unaffiliated, regardless of any prior party affiliation. Completing section 10 is OPTIONAL and will not affect the acceptance of your voter registration application.

Need More Information? Check boxes below if you would like to receive more information about:

- | | | |
|---|---|---|
| <input type="checkbox"/> voting by mail | <input type="checkbox"/> polling place accessibility | <input type="checkbox"/> available election materials in this alternative language: |
| <input type="checkbox"/> becoming a poll worker | <input type="checkbox"/> voting if you have a disability, including visual impairment | |

For further information visit www.NJElections.org or call toll-free 1-877-NJVOTER (1-877-658-6837)

Voter Profile

User Printed: BESPTOGU
Date: 03/30/2017

Voter Information:

Voter's Name: MAUREEN HENRY
Date of Birth: 10/17/1954
Voter ID: 152788718
Legacy ID:
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit: 2C
Suffix A:
Suffix B:
Street Number: 102
Street Name: SUSSEX ST
Address Line 2:
Address Line 3:
Municipality : HACKENSACK
Postal City: HACKENSACK
State: NJ
Zip: 07601

Party Information:

Current Party: Unaffiliated
Party Privilege Date:

Miscellaneous:

Gender: Female
Absentee Ballot Type: None
Registration Date: 06/13/2014
Registration Type: Mail-in with Identification
Last Action Taken Date: 06/13/2014

Status Information:

Voting Privilege Date:
Current Status: Rejected
Date Last Voted:
Rejected Reason: Not a U.S Citizen/Checked off No to U.S. Citizenship
Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Districts:

| | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|-----------------------|
| Ward | 01 | District | 04 | Congressional | 05 | Legislative 37 |
| Freeholder | | School | | Special | | Fire |

Previous Residence Addresses:

No Records Found for the Previous Residence Addresses

Election History:

No Records Found for the Election History

Previous Party:

No Records Found for the Previous Party

Previous Name:

No Records Found for the Previous Name

Registration History:

No Records Found for the Registration History



New Jersey Voter Registration Application

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

| | | | | | | |
|--|--|---|--|--------|-------|---|
| 1 Check boxes that apply: <input checked="" type="checkbox"/> New Registration <input type="checkbox"/> Address Change <input type="checkbox"/> Political Party Affiliation or Non-affiliation Change <input type="checkbox"/> Name Change <input type="checkbox"/> Signature Update | | | | | | FOR OFFICIAL USE ONLY Clerk <u>SR</u> Registration # <u>6-13-14</u> Office Time Stamp <u>9</u> <input type="checkbox"/> by mail <input type="checkbox"/> in person |
| 2 Are you a U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No (If No, DO NOT complete this form) | | Will you be 18 years of age by the next election? <input type="checkbox"/> Yes <input type="checkbox"/> No (If No, DO NOT complete this form) | | | | |
| 3 Last Name <u>HENRY</u> | First Name <u>MAUREEN</u> | Middle Name or Initial <u>R.</u> | Suffix (Jr., Sr., III) | | | |
| 4 Date of Birth <u>10-17-54</u> | | | | | | |
| 5 NJ Driver's License Number or MVC Non-driver ID Number <input type="checkbox"/> "I swear or affirm that I DO NOT have a NJ Driver's License, MVC Non-driver ID or a Social Security Number." | | | | | | |
| 6 Home Address (DO NOT use PO Box) | | Apt. | Municipality | County | State | Zip Code |
| 7 Mailing Address if different from above | | Apt. | Municipality | County | State | Zip Code |
| 8 Last Address Registered to Vote (DO NOT use PO Box) | | Apt. | Municipality | County | State | Zip Code |
| 9 Former Name if Making Name Change | | | a. Day Phone Number (Optional) <u>201-281-6239</u> b. E-Mail Address (Optional) | | | |
| 10 Do you wish to declare a political party affiliation? <input type="checkbox"/> Yes, the party name is _____ (Optional) <input checked="" type="checkbox"/> No, I do not wish to be affiliated with any political party. | | | | | | |
| 11 Gender <input checked="" type="checkbox"/> Female <input type="checkbox"/> Male | Declaration - I swear or affirm that: <input checked="" type="checkbox"/> I am a U.S. Citizen <input checked="" type="checkbox"/> I live at the above address <input checked="" type="checkbox"/> I will be at least 18 years old on or before the next election <input type="checkbox"/> I will have resided in the State and county at least 30 days before the next election <input type="checkbox"/> I am not on parole, probation or serving a sentence due to a conviction for an indictable offense under any federal or state laws <input type="checkbox"/> I understand that any false or fraudulent registration may subject me to a fine of up to \$10,000, imprisonment not to exceed 10 years, or both pursuant to R.S. 9:34-1 | | | | | |
| Signature: Sign or mark and date on lines below <u>[Signature]</u> | | | If applicant is unable to complete this form, print the name and address of individual who completed this form. Name _____ Date _____ Address _____ | | | |

152788718



MAUREEN HENRY
102 SUSSEX ST Apt-Unit 2C
HACKENSACK NJ 07601

is 5, 6 and 10

d are registering to vote for the first time: If you do not have any of the
 i provide cannot be verified, you will be asked to provide a COPY of a
 re and current address on it to avoid having to provide identification at the

released by any governmental agency. Any person who uses such
 penalties.

- 6) If you are homeless, you may complete section 6 by providing a contact point or the location where you spend most of your time.
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- ☐ voting by mail ☐ polling place accessibility ☐ available election materials in this alternative language:
☐ becoming a poll worker ☐ voting if you have a disability, including visual impairment

For further information visit Elections.NJ.gov or call toll-free 1-877-NJVOTER (1-877-658-6837)

NJDOE-IV-1/31/11-rev.


- 10) You may declare a political affiliation or you may declare to be unaffiliated, regardless of any prior party affiliation. Completing section 10 is OPTIONAL and will not affect the acceptance of your voter registration application.



New Jersey Voter Registration Application

76

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

| | | | | | | | | |
|--|--|--|--------------------------------|---|-----------------|--|--|-----------------------|
| 1 Check boxes that apply: <input type="checkbox"/> New Registration <input type="checkbox"/> Name Change <input type="checkbox"/> Address Change <input type="checkbox"/> Signature Update <input type="checkbox"/> Political Party Affiliation or Non-affiliation Change | | | | | | FOR OFFICIAL USE ONLY Clerk Noted: 6/27/14 | | |
| 2 Are you a U.S. Citizen? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If No, DO NOT complete this form) | | Will you be 18 years of age by the next election? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If No, DO NOT complete this form) | | | | | | |
| 3 Last Name Henry | | First Name Maureen | | Middle Name or Initial R. | | Suffix (Jr., Sr., III) | | Registration # |
| 4 Date of Birth | | | | | | Office Time Stamp | | |
| 5 NJ Driver's License Number or MVC Non-driver ID Number | | | | If you DO NOT have a NJ Driver's License or MVC Non-Driver ID, provide the last 4 digits of your Social Security Number. | | | | |
| <input type="checkbox"/> "I swear or affirm that I DO NOT have a NJ Driver's License, MVC Non-driver ID or a Social Security Number." | | | | | | | | |
| 6 Home Address (DO NOT use PO Box) 102 SUSSEX ST | | Apt. 2C | Municipality HACKENSACK | County | State NJ | Zip Code 07601 | | |
| 7 Mailing Address if different from above | | Apt. | Municipality | County | State | Zip Code | | |
| 8 Last Address Registered to Vote (DO NOT use PO Box) | | Apt. | Municipality | County | State | Zip Code | | |
| 9 Former Name if Making Name Change | | a. Day Phone Number (Optional) 201-281-6239 | | | | | | |
| | | b. E-Mail Address (Optional) | | | | | | |
| 10 Do you wish to declare a political party affiliation? <input type="checkbox"/> Yes, the party name is _____ (Optional) <input checked="" type="checkbox"/> No, I do not wish to be affiliated with any political party. | | | | | | | | |
| 11 Gender <input type="checkbox"/> Female <input type="checkbox"/> Male | | Declaration - I swear or affirm that: <ul style="list-style-type: none"> I am a U.S. Citizen I live at the above address I will be at least 18 years old on or before the next election | | | | | | |
| | | <ul style="list-style-type: none"> I will have resided in the State and county at least 30 days before the next election I am not on parole, probation or serving a sentence due to a conviction for an indictable offense under any federal or state laws | | | | | | |
| | | <ul style="list-style-type: none"> I understand that any false or fraudulent registration may subject me to a fine of up to \$15,000, imprisonment up to 5 years, or both pursuant to N.J.S. 19:34-1 | | | | | | |
| Signature: Sign or mark and date on lines below  | | | | If applicant is unable to complete this form, print the name and address of individual who completed this form. Name _____ Date _____ Address _____ | | | | |

152788718



MAUREEN HENRY
102 SUSSEX ST Apt-Unit 2C
HACKENSACK NJ 07601

Sections 5, 6 and 10

and are registering to vote for the first time: If you do not have any of the you provide cannot be verified, you will be asked to provide a COPY of a your name and current address on it to avoid having to provide

be released by any governmental agency. Any person who uses such al penalties.

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10) You may declare a political affiliation or you may declare to be unaffiliated, regardless of any prior party affiliation. Completing section 10 is OPTIONAL and will not affect the acceptance of your voter registration application.

Need More Information? Check boxes below if you would like to receive more information about:

- ☐ voting by mail
- ☐ becoming a poll worker

- ☐ polling place accessibility
- ☐ voting if you have a disability, including visual impairment

- ☐ available election materials in this alternative language:

For further information visit Elections.NJ.gov or call toll-free 1-877-NJVOTER (1-877-658-6837)

Voter Profile

User Printed: BESPTOGU

Date: 03/30/2017

Voter Information:

Voter's Name: ANNA JASINSKA

Date of Birth: 06/20/1981

Voter ID: 527512246

Legacy ID:

Archived Legacy ID:

Residence Address:

County: BERGEN

Unit: 2

Suffix A:

Suffix B:

Street Number: 46

Street Name: ORCHARD
ST

Address Line 2:

Address Line 3:

Municipality : GARFIELD

Postal City: GARFIELD

State: NJ

Zip: 07026

Party Information:

Current Party: Democratic*

Party Privilege Date:

Miscellaneous:

Gender: Female

Absentee Ballot Type: None

Registration Date: 04/02/2016

Registration Type: Agency with
Identification

Last Action Taken Date: 04/22/2016

Status Information:

Voting Privilege Date:

Current Status: Rejected

Date Last Voted:

Rejected Reason: Not a U.S Citizen/Checked off No to
U.S. Citizenship

Poll Worker Status:

Mailing Address:

Street Number:

Suffix A:

Suffix B:

Street Name/P.O. Box:

Unit:

Address Line 2:

Address Line 3:

City:

State:

Zip Code:

Country:

Inactive Confirmation Address:

Street Number:

Suffix A:

Suffix B:

Street Name/P.O. Box:

Unit:

Address Line 2:

Address Line 3:

City:

State:

Zip Code:

Country:

Districts:

| | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|-----------------------|
| Ward | 02 | District | 01 | Congressional | 09 | Legislative 35 |
| Freeholder | | School | | Special | | Fire |

Previous Residence Addresses:

No Records Found for the Previous Residence Addresses

Election History:

No Records Found for the Election History

Previous Party:

No Records Found for the Previous Party

Previous Name:

No Records Found for the Previous Name

Registration History:

No Records Found for the Registration History

Activities

Voter Registration

Add/Change Voter
Voter With No DOB
Voter Address Change
Confirmation
MVC - Agency
MVC File Online Voter
Maintain Voter History
Elections
System
Batch Scanning
MVC DL Search

Inquiries
Help
Logout

Compare MVC - Agency

new 4/22/16 BESPTOGU / B

| MVC Voter | | | |
|-------------------------|--|----------------------------------|------------|
| Name | ANNA JASINSKA | Date of Birth | 06/20/1981 |
| Residence Address | 46 ORCHARD ST APT 2 GARFIELD NJ 07026 | Mailing Address | |
| Driver's License Number | 107450470056814 | Original Driver's License Number | |
| Card Number | | Previous DOB | |
| Party | DEM | | |
| Previous Name | | Previous Address | |
| MVC Transaction Date | 04/02/2016 | | |

MVC Signature Date: 04/02/2016

Reject ☐ English:

Spanish:

Reject



| SVRS Matched Voters | | | | | | | | | | | |
|---|----------|------|---------------|-------------------|-------------------|-----------------|-------------------------|-------|-----|-------------------|------|
| Select | Voter Id | Name | Date of Birth | Registration Date | Residence Address | Mailing Address | Driver's License Number | Party | SSN | Confidence Factor | Stat |
| No Matching records Found. You can either choose to take No Action, Add or Reject this Motor Voter by clicking on the respective buttons. | | | | | | | | | | | |

* under Status Reason indicates voter has multiple status reasons.

527512246



ANNA JASINSKA
46 ORCHARD ST Apt-Unit 2
GARFIELD NJ 07026

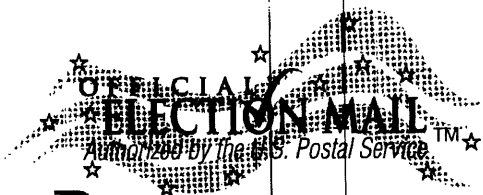
hed statewide.

matched statewide.

of First Name, DOB (including 01/01/1800) matched statewide.
inge,

Too Late Sch 4/5 4-1-16

If not delivered within two (2) days return to:
Commissioner of Registration
One Bergen County Plaza, Room 380
Hackensack, NJ 07601



NOFIT ORG.
U.S. POSTAGE
PAID
COUNTY OF BERGEN
OFFICE OF THE
COUNTY CLERK

YOU VOTE HERE
SU VOTO AQUÍ
여기서 투표하십시오

RETURN SERVICE REQUESTED



ACCESSIBLE POLLING LOCATION

The Polling Place for this Election District is
El Lugar de Votación Para Este Distrito Electoral está en
귀하의 선거구 투표소는

CITY OF GARFIELD

WARD NO.02 DISTRICT NO. 01

Firehouse #4
97 Outwater Ln



T3 P1 *****ECRWSH**C016



527512246

Anna Jasinska
46 Orchard St Apt 2
Garfield, NJ 07026-3273

A 02 01

Polls Open/Las Urnas Se Abren/ 투표소 개장시간 6 A.M. to 8 P.M.
Bergen County, NJ Tuesday, June 7, 2016
Condado de Bergen, NJ Martes, 7 de junio de 2016
뉴저지, 버겐 카운티 2016 년 6 월 7 일 화요일



Not Citz 6-1-16

**To: One Bergen County Plaza,
Room 380 Hackensack, NJ 07601**

**From: Anna
Jasinska**

My name is Anna Jasinska, I live on 46 Orchard Street Apartment 2, Garfield New Jersey, 07026. I would like to inform you that there has been a mistake, I have a green card; therefore I am not a citizen of the United States of America. With this connection, I am not entitled to vote. I also do not speak fluently in English. Following this note, I am sending back application 24, and please delete me from the voters list. Thank you very much, and I apologize for any inconveniences because of this.

527512246



ANNA JASINSKA
46 ORCHARD ST Apt-Unit 2
GARFIELD NJ 07026

Anna Jasinska



2016 JUN 1 - AM 8:53
SUPERINTENDENT
OF ELECTIONS
BERGEN COUNTY, N.J.

Voter Profile

User Printed: BESSPARS
Date: 03/30/2017

Voter Information:

Voter's Name: NOEL A KELLY
Date of Birth: 02/20/1966
Voter ID: 119564191
Legacy ID: J722430
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit:
Suffix A:
Suffix B:
Street Number: 256
Street Name: STUYVESANT RD
Address Line 2:
Address Line 3:
Municipality : TEANECK
Postal City: TEANECK
State: NJ
Zip: 07666

Party Information:

Current Party: Unaffiliated
Party Privilege Date:

Miscellaneous:

Gender: Male
Absentee Ballot Type: None
Registration Date: 10/07/1996
Registration Type: Mail-in without Identification
Last Action Taken Date: 01/12/2009

Status Information:

Voting Privilege Date:
Current Status: Rejected
Date Last Voted: 11/04/2008
Rejected Reason: Not a U.S Citizen/Checked off No to U.S. Citizenship
Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Districts:

| | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|-----------------------|
| Ward | 00 | District | 13 | Congressional | 05 | Legislative 37 |
| Freeholder | | School | | Special | | Fire |

Previous Residence Addresses:

No Records Found for the Previous Residence Addresses

Election History:

| Election Date & Name | Election Type | Election Code | Ballot Type | County Voted In | Municipality Voted In | Party Affiliation | Memo | User Scanned | Date Scanned | Date Counted | Ballot Status |
|------------------------------|---------------|---------------|-------------|-----------------|-----------------------|-------------------|------|--------------|--------------|--------------|---------------|
| 11/04/2008- GENERAL ELECTION | General | 00004 | Machine | BERGEN | TEANECK | | | BESPSTAN | 01/12/2009 | 11/04/2008 | |

Previous Party:

No Records Found for the Previous Party

Previous Name:

No Records Found for the Previous Name

Registration History:

From: Jennifer Jackson <jjackson@teanecknj.gov>

To: bcsuptelection.<bcsuptelection@aol.com>

Cc: Jaime Evelina <jevelina@teanecknj.gov>

Subject: Questionable Voter Registration - Springfield-MA 6-10-13

Date: Mon, Jun 10, 2013 3:54 pm

Attachments: Questionable_Voter_Registration_Applicant-Springfield-MA-6-10-13.pdf (396K)

Good Afternoon Ms. DiCostanzo:

For your information, please see attached.

Thank you.

Jennifer Jackson
Senior Clerk
Township of Teaneck
818 Teaneck Road
Teaneck, NJ 07666
(201) 837-1600 Ext. 1029
(201) 837-9547 Fax

119564191



NOEL A KELLY
256 STUYVESANT RD
TEANECK NJ 07666

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36 Court St
Springfield Ma, 01103
Phone: (413)787-6187
Fax: (413)787-6186

City of Springfield
Election Commission

Fax

To: Jamie Evalina

From: Chelsea Parmentier

Fax: (201) 837-9547

Pages: 2 (including cover)

Phone:

Date: May 23, 2013

Re: Noel Kelly

CC:

☐ Urgent

☐ For Review

☐ Please Comment

☐ Please Reply

☐ Please Recycle

Comments:

Good Afternoon,

This is to inform you that one of your registered voters has listed himself as a resident here in Springfield, Ma.

Mr. Kelly has informed us that he was a registered voter in Teaneck, NJ. However, Mr. Kelly is not a U.S. citizen and can not vote. He stated that he has voted in your community. Please remove him from your voting list, as he is now a resident of Springfield, MA

Thank you!

Massachusetts Official Voter Registration Form • William Francis Galvin, Secretary of the Commonwealth

NOTE: If you checked "no" to either of these questions, do not complete this form.

Check all that apply: Are you a Citizen of the United States of America? ☐ Yes ☒ No Will you be 18 years of age or older on or before Election Day? ☐ Yes ☒ No

First name: NOEL Middle name or initial: SR Jr. Sr. II III IV (circle one if appropriate)

Full name: KEVIN Last name: NOEL Jr. Sr. II III IV (circle one if appropriate)

Former name (if applicable): last name

Address where you live now (street number, street name, rural route number and box number): 38 WEBSTER ST. SPYING FIELD city or town: SPYING FIELD zip code + 4-digit: 01109

Address where you receive all your mail (if different from #1): 38 WEBSTER ST. SPYING FIELD city or town: SPYING FIELD zip code + 4-digit: 01109

Identification #: 7 license # or last 4

Date of birth: 2/24/66 month day year

Party enrollment or designation (check one): ☒ Democratic ☐ Republican ☐ No Party (unenrolled) ☐ Political Designation (not a political party):

Address at which you were last registered to vote: FEARNECK RD street number / street name / rural route number and box number / post office box apartment number city or town state zip code + 4-digit

Telephone (optional): (20) 212-2191 Check if unlisted

If the applicant is unable to sign this form, give the name, address and telephone number (optional) of the person helping the applicant: FEARNECK RD street number / street name / rural route number and box number / post office box apartment number city or town state zip code + 4-digit

I hereby swear (affirm) that I am the person named above, that the above information is true, that I AM A CITIZEN OF THE UNITED STATES, that I am not a person under a guardianship which prohibits my registering to vote, that I am not temporarily or permanently disqualified by law from voting because of corrupt practices in respect to elections, that I am not currently incarcerated for a felony conviction, and that I consider this residence to be my home. Signed under the penalty of perjury.

Today's date: 5/23/13 month day year Signed: [Signature] name

Voter Profile

User Printed: BESOEAD2
Date: 03/30/2017

Voter Information:

Voter's Name: KANG KIM
Date of Birth: 04/23/1965
Voter ID: 152636402
Legacy ID:
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit: E2
Suffix A:
Suffix B:
Street Number: 2329
Street Name: HUDSON
TER
Address Line 2:
Address Line 3:
Municipality : FORT LEE
Postal City: FORT LEE
State: NJ
Zip: 07024

Party Information:

Current Party: Unaffiliated
Party Privilege Date:

Miscellaneous:

Gender: Male
Absentee Ballot Type: None
Registration Date: 07/01/2013
Registration Type: Agency with
Identification
Last Action Taken Date: 07/24/2013

Status Information:

Voting Privilege Date:
Current Status: Rejected
Date Last Voted:
Rejected Reason: Not a U.S Citizen/Checked off No to
U.S. Citizenship
Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Districts:

| | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|-----------------------|
| Ward | 00 | District | 15 | Congressional | 09 | Legislative 37 |
| Freeholder | | School | | Special | | Fire |

Previous Residence Addresses:

| Change Date | Street Number | Street Name | Address Line 2 | Address Line 3 | Unit | Municipality | State | Zip Code |
|-------------|---------------|-------------------------|----------------|----------------|------|--------------|------------|----------|
| 07/12/2013 | | 119 HARBOR VIEW TERRACE | | | | EDGEWATER | New Jersey | 07020 |

Election History:

No Records Found for the Election History

Previous Party:

No Records Found for the Previous Party

Previous Name:

No Records Found for the Previous Name

Registration History:

No Records Found for the Registration History

Main Menu:

Compare MVC - Agency

BESOEAD2 / 1

Activities

Voter Registration

Add/Change Voter
Voter With No DOB
Voter Address Change
Confirmation
Voter Address Change
Confirmation Export
MVC - Agency
MVC File Online Voter
Voters who have
Verification / Postal Notice
Verif. and Ack. Card Export
MVC Manual Update

Maintain Voter History

Maintain County Data

Elections

System

Poll Book Printing Schedule

Duplicate Voters

Batch Scanning

Messaging

MVC DL Search

Backend Reporting

Document Imaging

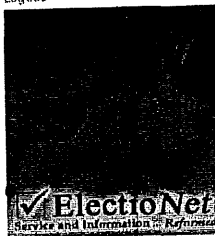
Handheld Scanning

Inquiries

Reports

Help

Logout



| MVC Voter | | | |
|-------------------------|--|----------------------------------|--|
| Name | KANG KIM | Date of Birth | 04/23/1965 |
| Residence Address | 2329 HUDSON TERRACE E2 FORT LEE NJ 07024-7964 | Mailing Address | |
| Driver's License Number | K44084240004651 | Original Driver's License Number | K44084240004651 |
| Card Number | | Previous DOB | 04/23/1965 |
| Previous Name | KANG KIM | Previous Address | 119 HARBOR VIEW TERRACE EDGEWATER NJ 07020-1186 |
| MVC Transaction Date | 07/01/2013 | | |

MVC Signature Date: 07/01/2013

Reject ☐ English:

Spanish:

Reject

No Card Issued

| SVRS Matched Voters | | | | | | | | | | |
|-------------------------------------|-----------|-----------------|---------------|-------------------|---|-----------------|-------------------------|-----|-------------------|---------|
| Select | Voter Id | Name | Date of Birth | Registration Date | Residence Address | Mailing Address | Driver's License Number | SSN | Confidence Factor | Status |
| <input checked="" type="checkbox"/> | 101125711 | KYUNG AE KIM | 01/01/1800 | 08/26/1985 | 7 GOODHART DR, LIVINGSTON, NJ 07039 | | | | 25 % | Deleted |

* under Status Reason indicates voter has multiple status reason

152636402



KANG KIM
2329 HUDSON TER Apt-Unit E2
FORT LEE NJ 07024

Note:

If status is blank, that implies the voter status is Active.

If Confidence Factor is 100 %, that implies Driver's License

If Confidence Factor is 50 %, that implies Last Name, First

Last Name, First Name, First Letter of Middle Name and DOB (01/01/1800) matched statewide.

If Confidence Factor is 25 %, that implies Soundex of Last Name, Soundex of First Name, DOB (including 01/01/1800) matched statewide.

Name matching process includes MVC previous names if there is a name change.

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New Jersey Voter Registration Application

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

| | | | |
|--|---|--|---|
| 1 Check boxes that apply: <input type="checkbox"/> New Registration <input type="checkbox"/> Name Change <input type="checkbox"/> Address Change <input checked="" type="checkbox"/> Signature Update <input type="checkbox"/> Political Party Affiliation or Non-affiliation Change | | FOR OFFICIAL USE ONLY Clerk Noted: 7-24-13 | |
| 2 Are you a U.S. Citizen? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If No, DO NOT complete this form) | | Will you be 18 years of age by the next election? <input type="checkbox"/> Yes <input type="checkbox"/> No (If No, DO NOT complete this form) | |
| 3 Last Name KIM | First Name KANG | Middle Name or Initial | Suffix (Jr., Sr., III) Registration # 152636402 |
| 4 Date of Birth 04/23/1965 | | Office Time Stamp JUL 23 PM 10 | |
| 5 NJ Driver's License Number or MVC Non-driver ID Number K4408 42400 04651 | | If you DO NOT have a NJ Driver's License or MVC Non-Driver ID, provide the last 4 digits of your Social Security Number. | |
| <input type="checkbox"/> "I swear or affirm that I DO NOT have a NJ Driver's License, MVC Non-driver ID or a Social Security Number." | | | |
| 6 Home Address (DO NOT use PO Box) 2329 HUDSON TER | Apt. E2 | Municipality BERGEN | County NJ |
| 7 Mailing Address if different from above | Apt. | Municipality | County State Zip Code |
| 8 Last Address Registered to Vote (DO NOT use PO Box) | Apt. | Municipality | County State Zip Code |
| 9 Former Name if Making Name Change | | a. Day Phone Number (Optional) b. E-Mail Address (Optional) KANG@KANGKIM.COM | |
| 10 Do you wish to declare a political party affiliation? <input type="checkbox"/> Yes, the party name is _____ (Optional) <input checked="" type="checkbox"/> No, I do not wish to be affiliated with any political party. | | | |
| 11 Gender <input type="checkbox"/> Female <input checked="" type="checkbox"/> Male | Declaration - I swear or affirm that: <input checked="" type="checkbox"/> I am a U.S. Citizen <input checked="" type="checkbox"/> I live at the above address <input checked="" type="checkbox"/> I will be at least 18 years old on or before the next election <input type="checkbox"/> I will have resided in the State and county at least 30 days before the next election <input type="checkbox"/> I am not on parole, probation or serving a sentence due to a conviction for an indictable offense under any federal or state laws <input type="checkbox"/> I understand that any false or fraudulent registration may subject me to a fine of up to \$15,000, imprisonment up to 5 years, or both pursuant to R.S. 19:34-1 | | |
| Signature: Sign or mark and date on lines below [Signature] Date 7/18/13 | | If applicant is unable to complete this form, print the name and address of individual who completed this form. Name _____ Date _____ Address _____ | |

Important Instructions for sections 5, 6 and 10

152636402



KANG KIM
2329 HUDSON TER Apt-Unit E2
FORT LEE NJ 07024

are registering to vote for the first time: If you do not have any of the provide cannot be verified, you will be asked to provide a COPY of a and current address on it to avoid having to provide identification at the

leased by any governmental agency. Any person who uses such penalties.

providing a contact point or the location where you spend most of

10) You may declare a political affiliation or you may declare to be unaffiliated, regardless of any prior party affiliation. Completing section 10 is OPTIONAL and will not affect the acceptance of your voter registration application.

Need More Information? Check boxes below if you would like to receive more information about:

- ☐ voting by mail
- ☐ becoming a poll worker
- ☐ polling place accessibility
- ☐ voting if you have a disability, including visual impairment
- ☐ available election materials in this alternative language:

For further information visit www.NJElections.org or call toll-free 1-877-NJVOTER (1-877-658-6837)

Voter Profile

User Printed: BESPTOGU
Date: 03/30/2017

Voter Information:

Voter's Name: YOUNGSIK Y KIM
Date of Birth: 07/17/1953
Voter ID: 152349312
Legacy ID:
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit: B7
Suffix A:
Suffix B:
Street Number: 22
Street Name: HENRY AVE
Address Line 2:
Address Line 3:
Municipality : PALISADES PARK
Postal City: PALISADES PARK
State: NJ
Zip: 07650

Party Information:

Current Party: Unaffiliated
Party Privilege Date:

Miscellaneous:

Gender: Not Entered
Absentee Ballot Type: None
Registration Date: 09/12/2012
Registration Type: Mail-in without Identification
Last Action Taken Date: 10/23/2012

Status Information:

Voting Privilege Date:

Current Status: Rejected

Date Last Voted:

Rejected Reason: Not a U.S Citizen/Checked off No to U.S. Citizenship

Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Districts:

| | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|-----------------------|
| Ward | 00 | District | 03 | Congressional | 09 | Legislative 37 |
| Freeholder | | School | | Special | | Fire |

Previous Residence Addresses:

No Records Found for the Previous Residence Addresses

Election History:

No Records Found for the Election History

Previous Party:

No Records Found for the Previous Party

Previous Name:

No Records Found for the Previous Name

Registration History:

No Records Found for the Registration History



뉴저지 유권자 등록 신청서

잉크펜을 이용하여 인쇄체로 명확하게 작성하십시오. 선택 항목이 아닌 이상 모든 항목을 작성해야 합니다.

E
Nadine 76

| | | | | | | |
|--|--|--------------------------------|--|-------------------|------------|---|
| 1 해당 사항에 체크 표시 하십시오: <input type="checkbox"/> 신규 등록 <input type="checkbox"/> 주소 변경 <input type="checkbox"/> 소속 정당 또는 무소속으로 변경 <input type="checkbox"/> 이름 변경 <input type="checkbox"/> 서명 갱신 | | | | | | 사무국 작성란 |
| 2 미국 시민입니까? <input type="checkbox"/> 예 <input type="checkbox"/> 아니오 (아닌 경우, 이 양식을 작성하지 마십시오) | | | 다음 선거일까지 만 18세 이상이 됩니까? <input type="checkbox"/> 예 <input type="checkbox"/> 아니오 (아닌 경우, 이 양식을 작성하지 마십시오) | | | 서기 |
| 3 성 KIM | | 이름 Young SIK | 중간 이름 또는 약자 Young | 호칭(Jr., Sr., III) | | 등록 # |
| 4 생년월일 1953. 7. 17 | | | | | | 사무국 시간 스탬프 |
| 5 뉴저지 운전면허번호 또는 MVC 비운전자 신분증 번호 뉴저지 운전면허 또는 MVC 비운전자 신분증 번호가 없을 경우, 사회보장번호(SSN)의 마지막 4자리를 기입하십시오. <input type="checkbox"/> "나는 뉴저지 운전면허증, MVC 비운전자 신분증 또는 사회보장번호(SSN)가 없음을 선택 또는 확인합니다." | | | | | | |
| 6 자택 주소(사서함(P.O. Box)은 사용하지 마시오) 22 Henry Ave | Apt B#7 | 시/타운 Palisades Park | 카운티 NJ | 주 | 우편번호 07650 | |
| 7 우편용 주소(상기 주소와 다른 경우 기입) 22 Henry Ave | Apt B#7 | 시/타운 Palisades Park | 카운티 NJ | 주 | 우편번호 07650 | |
| 8 유권자 등록한 최근 주소(사서함(P.O. Box)은 사용하지 마시오) | Apt | 시/타운 | 카운티 | 주 | 우편번호 | <input type="checkbox"/> 우편 <input type="checkbox"/> 인편 |
| 9 이름을 변경하는 경우, 이전에 사용한 이름 | | a. 주간 전화번호(선택 항목) 201 704 5287 | | | | |
| | | b. 이메일 주소(선택 항목) | | | | |
| 10 소속 정당을 선택하시겠습니까? (선택 항목) <input type="checkbox"/> 예, 내가 소속된 정당 이름: <input type="checkbox"/> 아니오, 나는 어느 정당에도 속하지 않고 싶습니다. | | | | | | |
| 11 성별 <input type="checkbox"/> 여자 <input checked="" type="checkbox"/> 남자 | 선언 - 나는 다음을 선언 또는 확인합니다: ● 나는 미국 시민입니다 ● 나는 상기 주소에 거주합니다 ● 다음 선거일 또는 그 전에 만 18세 이상이 됩니다 ● 나는 다음 선거일로부터 최소한 30일 전 내에는 이 주와 카운티에 거주할 것입니다 ● 나는 가석방, 보호관찰형 중이거나 연방법원 또는 주 법에 따라 형사 기소되는 유죄판결로 복역 중이 아닙니다 ● 나는 2012년 11월 6일 현재 뉴저지 유권자 등록을 할 경우 \$5,195.12 이하의 최대 \$15,000의 벌금형이나 징역형 또는 두 가지 모두를 받을 수 있음을 알고 있습니다 | | | | | |
| 서명: 아래 밑줄에 서명 또는 표시를 하고 날짜를 기재하십시오 | | | | | | |
| 만일 신청인이 본 양식을 작성할 수 없을 경우, 대신 작성한 사람의 이름과 주소를 인쇄체로 기재하십시오. 이름 _____ 날짜 9/7/2012 주소 _____ | | | | | | |

5, 6, 10항에 대한 중요한 지침

152349312



YOUNGSIK Y KIM
22 HENRY AVE Apt-Unit B7
PALISADES PARK NJ 07650

※ 등록인: 만일 귀하가 5항에서 요구하는 정보 중 어느 것도 보유하고 있지 않거나 신분 확인을 제공해야만 하는 상황을 피하고자 사진을 수록한 현재 유효한 할 것을 요청받을 것입니다.

※ 하지 않을 것입니다. 이러한 번호를 불법으로 사용하는 자는 형사처벌을

※는 곳의 연락처나 위치를 6항에 기재해도 됩니다.

10) 이전의 정당 가입 여부와는 상관없이, 정당 가입 또는 비가입을 선택할 수 있습니다. 10항은 선택 기재 항목이며, 귀하의 유권자 등록 신청 수락에 영향을 미치지 않을 것입니다.

보다 자세한 정보가 필요하십니까? 아래 정보 항목 중 필요한 정보에 체크 표시하십시오.

- ☒ 우편 투표 ☐ 투표소 접근 편의성
☐ 투표소 직원으로 일하기 ☐ 시각장애인을 포함한 장애인으로서의 투표

☐ 기타 언어로 제작된 선거 관련 자료(아래에 희망 언어 기재):

추가 정보가 필요한 경우, www.NJElections.org를 방문하거나 무료전화 1-877-NJVOTER(1-877-658-6837)로 문의하십시오.



PATRICIA DI COSTANZO
SUPERINTENDENT OF ELECTIONS
COMMISSIONER OF REGISTRATION

152349312



YOUNGSIK Y KIM
22 HENRY AVE Apt-Unit B7
PALISADES PARK NJ 07650

BERGEN COUNTY
SUPERINTENDENT OF ELECTIONS
ONE BERGEN COUNTY PLAZA, ROOM 380
HACKENSACK, N. J. 07601
PHONE: (201) 336-6100
FAX: (201) 336-6111

T 10/23/12
alist

NOT U.S. citizen

THERESA M. O'CONNOR
DEPUTY SUPERINTENDENT OF ELECTIONS
DEPUTY COMMISSIONER OF REGISTRATION

Dear Registrant:

Our office received your Voter Registration application and the following was not completed:

*Date of Birth 04/24/1940

*You did not check if you are a US Citizen

Please mark with an X

☐ I am a US Citizen

☒ I am NOT a US Citizen

*You did not sign your application.

Signature

Print

Please return in the enclosed envelope by October 18, 2012.

Sincerely,

Patricia DiCostanzo
Superintendent of Elections

SUPERINTENDENT
OF ELECTIONS
BERGEN COUNTY, N.J.
2012 OCT 22 PM 12 02

Voter Profile

User Printed: BESPTOGU
Date: 03/30/2017

Voter Information:

Voter's Name: MARIE P KOLOVOS
Date of Birth: 02/05/1968
Voter ID: 152397750
Legacy ID:
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit:
Suffix A:
Suffix B:
Street Number: 47
Street Name: MAC
ARTHUR AVE
Address Line 2:
Address Line 3:
Municipality : LODI
Postal City: LODI
State: NJ
Zip: 07644

Party Information:

Current Party: Unaffiliated
Party Privilege Date:

Miscellaneous:

Gender: Not Entered
Absentee Ballot Type: None
Registration Date: 09/27/2012
Registration Type: Agency with
Identification
Last Action Taken Date: 10/04/2012

Status Information:

Voting Privilege Date:
Current Status: Rejected
Date Last Voted:
Rejected Reason: Not a U.S Citizen/Checked off No to
U.S. Citizenship
Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Districts:

| | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|-----------------------|
| Ward | 00 | District | 10 | Congressional | 05 | Legislative 38 |
| Freeholder | | School | | Special | | Fire |

Previous Residence Addresses:

| Change Date | Street Number | Street Name | Address Line 2 | Address Line 3 | Unit | Municipality | State | Zip Code |
|-------------|---------------|-------------------|----------------|----------------|------|--------------|------------|----------|
| 10/04/2012 | | 47 MAC ARTHUR AVE | | | | LODI | New Jersey | 07644 |

Election History:

No Records Found for the Election History

Previous Party:

No Records Found for the Previous Party

Previous Name:

No Records Found for the Previous Name

Registration History:

No Records Found for the Registration History

Main Menu:

Activities

Inquiries

Voter Registration

voter Mail-In Ballot

voter Mail-In Ballot Request

voter Election History

voter Change Audit

voter Deletions

County Data

Polling Place

Purged Voters

voter DIA

wVC File

Reports

Help

Logout



Compare MVC - Agency

BESOEAD2 / BERGEN

MVC Voter

| | | | |
|-------------------------|---|----------------------------------|---|
| Name | MARIE P KOLOVOS | Date of Birth | 02/05/1968 |
| Residence Address | 47 MAC ARTHUR AVE LODI NJ 07644-3711 | Mailing Address | |
| Driver's License Number | K62945197752682 | Original Driver's License Number | C22025197752662 |
| Card Number | | Previous DOB | 02/05/1966 |
| Previous Name | MARIA P CEFALA | Previous Address | 47 MAC ARTHUR AVE LODI NJ 07644-3711 |
| MVC Transaction Date | 09/27/2012 | | |

MVC Signature Date: 09/27/2012

Reject ☐ English:☒ Spanish:

Reject

Reject
Signature
from
Importing

| SVRS Matched Voters | | | | | | | | | | | |
|-------------------------------------|-----------|----------------|---------------|-------------------|--|---|-------------------------|-----|-------------------|-----------------------|---|
| Select | Voter Id | Name | Date of Birth | Registration Date | Residence Address | Mailing Address | Driver's License Number | SSN | Confidence Factor | Status | Status Reason |
| <input checked="" type="checkbox"/> | 101058730 | MARIA CIFELLI | 01/01/1800 | 06/09/1965 | 24 JANNARONE ST, Apt-Unit 1, BELLEVILLE, NJ 07109 | | | | 25 % | | |
| <input checked="" type="checkbox"/> | 101068186 | MARIE CIFELLI | 01/01/1800 | 03/28/1968 | 14 UNDERHILL CT, NUTLEY, NJ 07110 | | | | 25 % | | |
| <input checked="" type="checkbox"/> | 101075641 | MARY CAVALLO | 01/01/1800 | 04/21/1970 | 165 FAIRFIELD AVE, WEST CALDWELL, NJ 07006 | | | | 25 % | | |
| <input checked="" type="checkbox"/> | 121021945 | MARY COVELLO | 01/01/1800 | 09/21/1953 | 1250 MADISON AVE, PATERSON, NJ 07503 | | | | 25 % | | |
| <input checked="" type="checkbox"/> | 101027945 | MARY R CIPOLLA | 01/01/1800 | 09/26/1955 | 34 EVELYN PL, NUTLEY, NJ 07110 | | | | 25 % | | |
| <input checked="" type="checkbox"/> | 106165043 | MARY KALAPOS | 01/01/1800 | 09/22/1954 | 506 FERNWOOD TER, LINDEN, NJ 07036 | | | | 25 % | Inactive Confirmation | |
| <input checked="" type="checkbox"/> | 101169177 | MARIA CAPALA | 01/01/1800 | 10/02/1980 | 1 LOUISE CT, BELLEVILLE, NJ 07109 | | | | 25 % | Deleted | Moved out of County |
| <input checked="" type="checkbox"/> | 101043505 | MARIE CIFELLI | 01/01/1800 | 09/26/1962 | 24 MOUNTAIN AVE, BLOOMFIELD, NJ 07003 | | | | 25 % | Deleted | Deceased |
| <input checked="" type="checkbox"/> | 114016540 | MARIE COPPOLA | 01/01/1800 | 08/02/1960 | 40 BRAINARD AVE, MIDDLETOWN, NJ 07758 | 40 BRAINARD AVE, PORT MONMOUTH, NJ 07758 | | | 25 % | Deleted | Inactive Confirmation through two federal general elections |
| <input checked="" type="checkbox"/> | 101004270 | MARIE CUPOLO | 01/01/1800 | 08/22/1938 | 110 FLOYD AVE, BLOOMFIELD, NJ 07003 | | | | 25 % | Deleted | Inactive Confirmation through two federal general elections |

* under Status Reason indicates voter has multiple status reasons.

1 2 3

Go

Next 10

152397750



MARIE P KOLOVOS
47 MAC ARTHUR AVE
LODI NJ 07644

atched statewide.

) matched statewide.

: of First Name, DOB (including 01/01/1800) matched statewide.
hange.

No Vote

6/13/2013

To Whom it may Concern,

Please remove my name From
the Voting list, as I am not an
American Citizen.

Voter ID # 152397750

152397750



MARIE P KOLOVOS
47 MAC ARTHUR AVE
LODI NJ 07644

delete NON-citizen / Kathy

6/28/13.

Thank you.



Reg'd 9/27/12 No Vote

Drakey @ Co.
Email
Parker

2013 JUN 17 11:13
LODI NJ

Voter Profile

User Printed: BESOEAD2
Date: 03/29/2017

Voter Information:

Voter's Name: MASAKI KONDO
Date of Birth: 01/01/1111
Voter ID: 152271875
Legacy ID:
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit:
Suffix A:
Suffix B:
Street Number: 16
Street Name: N BAYARD LN
Address Line 2:
Address Line 3:
Municipality : MAHWAH
Postal City: MAHWAH
State: NJ
Zip: 07430

Party Information:

Current Party: Unaffiliated
Party Privilege Date: 06/18/2012

Miscellaneous:

Gender: Not Entered
Absentee Ballot Type: None
Registration Date: 06/18/2012
Registration Type: Mail-in without Identification
Last Action Taken Date: 07/03/2012

Status Information:

Voting Privilege Date: 06/18/2012
Current Status: Deleted
Date Last Voted:
Deleted Date: 07/03/2012
Deleted Reason: Administrative Action
Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Districts:

| | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|-----------------------|
| Ward | 00 | District | 01 | Congressional | 05 | Legislative 39 |
| Freeholder | | School | | Special | | Fire |

Previous Residence Addresses:

No Records Found for the Previous Residence Addresses

Election History:

No Records Found for the Election History

Previous Party:

No Records Found for the Previous Party

Previous Name:

No Records Found for the Previous Name

Registration History:

No Records Found for the Registration History

Inquiry - Voter Change Audit History**BESOEAD2 /
BERGEN****Voter Name:** MASAKI KONDO

| Change Audit History: | | | | | | |
|------------------------------|-------------|--------------------|-----------------------|------------------------|-----------------------|---------------------|
| Audit Date/Time | Type | Change Date | Change Reason | Changed User ID | Type of Change | Change Memo |
| 07/03/2012 10:09 AM | Deleted | 07/03/2012 | Administrative Action | BESBBARB | Status, Other | NOT A US CITIZEN |
| 06/26/2012 11:35 AM | Add | | New Voter | BESBBARB | | |

[Close](#)[Print List](#)



New Jersey Voter Registration Application

76

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

| | | | | | | | |
|--|--|--|--------------------|---|----------------------------------|----------------|--|
| 1 Check boxes that apply: <input type="checkbox"/> New Registration <input type="checkbox"/> Address Change <input type="checkbox"/> Political Party Affiliation or Non-affiliation Change <input type="checkbox"/> Name Change <input type="checkbox"/> Signature Update | | | | | | | FOR OFFICIAL USE ONLY Clerk _____ Registration # _____ Office Time Stamp _____ |
| 2 Are you a U.S. Citizen? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If No, DO NOT complete this form) | | Will you be 18 years of age by the next election? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If No, DO NOT complete this form) | | | | | |
| 3 Last Name <u>KONDO</u> | | First Name <u>MASAKI</u> | | Middle Name or Initial _____ | Suffix (ex. Jr., Sr., III) _____ | | |
| 4 Date of Birth Month <u>01</u> Day <u>24</u> Year <u>1955</u> | | | | | | | |
| 5 NJ Driver's License Number or MVC Non-driver ID Number <u>Same as before</u> If you DO NOT have a NJ Driver's License or MVC Non-Driver ID, provide the last 4 digits of your Social Security Number. _____ <input type="checkbox"/> "I swear or affirm that I DO NOT have a NJ Driver's License, MVC Non-driver ID or a Social Security Number." | | | | | | | |
| 6 Home Address (DO NOT use PO Box) <u>Same as before</u> | | Apt. _____ | Municipality _____ | County _____ | State _____ | Zip Code _____ | |
| 7 Mailing Address if different from above _____ | | Apt. _____ | Municipality _____ | County _____ | State _____ | Zip Code _____ | |
| 8 Last Address Registered to Vote (DO NOT use PO Box) _____ | | Apt. _____ | Municipality _____ | County _____ | State _____ | Zip Code _____ | |
| 9 Former Name if Making Name Change _____ Day Phone Number (Optional) _____ | | | | | | | |
| 10 Do you wish to declare a political party affiliation? (Optional) <input type="checkbox"/> Yes, the party name is _____ <input type="checkbox"/> No, I do not wish to be affiliated with any political party. | | | | | | | |
| 11 Gender <input type="checkbox"/> Female <input checked="" type="checkbox"/> Male | | Declaration - I swear or affirm that: <input checked="" type="checkbox"/> I am a U.S. Citizen <input checked="" type="checkbox"/> I live at the above address <input checked="" type="checkbox"/> I will be at least 18 years old on or before the next election <input type="checkbox"/> I will have resided in the State and county at least 30 days before the next election <input type="checkbox"/> I am not on parole, probation or serving a sentence due to a conviction for an indictable offense under any federal or state laws <input type="checkbox"/> I understand that any false or fraudulent registration may subject me to a fine of up to \$15,000, imprisonment up to 5 years, or both pursuant to R.S. 19:34-1 | | | | | |
| Signature: Sign or mark and date on line below <u>[Signature]</u> Date <u>6-29-12</u> | | | | If applicant is unable to complete this form, print the name and address of individual who completed this form. Name _____ Date _____ Address _____ | | | |

Important Instructions for sections 5, 6 and 10

- 5) Registrants who are submitting this form by mail and are registering to vote for the first time: If you do not have any of the information required by section 5, or the information you provide cannot be verified, you will be asked to provide a COPY of a current and valid photo id, or a document with your name and current address on it to avoid having to provide identification at the polling place.
 Note: ID Numbers are Confidential and will not be released by any governmental agency. Any person who uses such numbers illegally shall be subject to criminal penalties.
- 6) If you are homeless, you may complete section 6 by providing a contact point or the location where you spend most of your time.
- 10) You may declare a political affiliation or you may declare to be unaffiliated, regardless of any prior party affiliation. Completing section 10 is Optional and will not affect the acceptance of your voter registration application.

Need More Information? Check boxes below if you would like to receive more information about:

- | | | |
|---|---|---|
| <input type="checkbox"/> voting by mail | <input type="checkbox"/> polling place accessibility | <input type="checkbox"/> available election materials in this alternative language: |
| <input type="checkbox"/> becoming a poll worker | <input type="checkbox"/> voting if you have a disability, including visual impairment | |

For further information visit www.NJElections.org or call toll-free 1-877-NJVOTER (1-877-658-6837)

PATRICIA DICOSTANZO
BERGEN COUNTY
SUPERINTENDENT OF ELECTIONS
1 BERGEN COUNTY PLAZA ROOM 380
HACKENSACK NJ 07601
PHONE: 201-336-6100
FAX: 201-336-6111

MASAKI KONDO
16 N BAYARD LN
MAHWAH NJ 07430

06/26/2012

Voter ID# 152271875



Dear Masaki,

This office is in receipt of your voter registration application. It cannot be completely processed for the following reason(s).

- Birth date is missing Jan, 24, 1955

Please completely fill out the enclosed (postage paid) voter registration form, including your signature, and return to our office by mail or in person.

If you have any questions feel free to contact our office.

Thank you for your help in resolving this matter.

SUPERINTENDENT
OF ELECTIONS
BERGEN COUNTY, N.J.
2012 JUL 3 AM 11 06

Sincerely Yours,

PATRICIA DICOSTANZO
SUPERINTENDENT OF ELECTIONS

Dear Ms. Dicostanzo

I am not a US Citizen since I have had
a green card for over 20 years.

Sorry, I have no right to vote in the USA.

Sincerely.

Masaki Kondo.

7-1-29 12

Voter Profile

User Printed: BESPTOGU
Date: 03/30/2017

Voter Information:

Voter's Name: MASOUD KOUCHEK-MANESH
Date of Birth: 06/02/1975
Voter ID: 522616167
Legacy ID:
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit:
Suffix A:
Suffix B:
Street Number: 459
Street Name: SUMMIT ST
Address Line 2:
Address Line 3:
Municipality : RIDGEWOOD
Postal City: RIDGEWOOD
State: NJ
Zip: 07450

Party Information:

Current Party: Unaffiliated
Party Privilege Date:

Miscellaneous:

Gender: Not Entered
Absentee Ballot Type: None
Registration Date: 05/08/2015
Registration Type: Agency with Identification
Last Action Taken Date: 05/14/2015

Status Information:

Voting Privilege Date:
Current Status: Rejected
Date Last Voted:
Rejected Reason: Not a U.S Citizen/Checked off No to U.S. Citizenship
Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Districts:

| | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|-----------------------|
| Ward | 00 | District | 02 | Congressional | 05 | Legislative 40 |
| Freeholder | | School | | Special | | Fire |

Previous Residence Addresses:

| Change Date | Street Number | Street Name | Address Line 2 | Address Line 3 | Unit | Municipality | State | Zip Code |
|-------------|---------------|--------------|----------------|----------------|------|--------------|------------|----------|
| 05/14/2015 | | 290 LUCAS LN | | | | WYCKOFF | New Jersey | 07481 |

Election History:

No Records Found for the Election History

Previous Party:

No Records Found for the Previous Party

Previous Name:

No Records Found for the Previous Name

Registration History:

No Records Found for the Registration History

151449768

New Jersey Voter Registration Application

7/15/12

I am applying to register to vote at the address listed on my NJ Drivers License/ID Card. I swear or affirm that:

- * I am a U.S. Citizen.
- * I reside at my DL/ID address displayed below.
- * I will be at least 18 years old on or before the next election.
- * I will have resided SUMMIT AND COUNTY at least 30 days before the next election.
- * I am not on parole, probation or serving sentence due to a conviction for an indictable offense under any federal or state laws.
- * I understand that any false or fraudulent registration may subject me to a fine up to \$15,000, imprisonment up to 5 years or both pursuant to R.S. 19:34-1.

SUPERSTATE ELECTIONS
BERGEN COUNTY, NJ
2015 MAY 13 AM 9 25

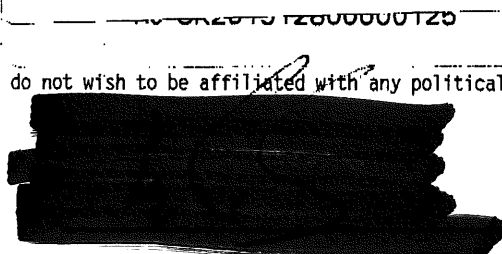
Do you wish to declare a political party affiliation? (Optional)

() Yes, the party name is : _____ () No, I do not wish to be affiliated with any political party.

K6790 52800 06752 06-02-1975
MASOUD KOUCEK-MANESH
459 SUMMIT ST
RIDGEWOOD NJ 07450-0000 B



MASOUD KOUCEK-MANESH
459 SUMMIT ST
RIDGEWOOD NJ 07450



voter ID
522616167

Masoud KoucheK-Manesh

Registered to vote but shouldn't
have. Currently not a U.S.
Citizen. Would like to
meet with you next Monday
morning if possible. Needs to
be removed from system.

appt w/ PD

Ham

3.8.16

Please call his wife since
he may not understand
English too well

Soriaya Mofarah
201-925-9632

522616167



MASOUD KOUCHEK-MANESH
459 SUMMIT ST
RIDGEWOOD NJ 07450

Voter Profile

User Printed: BESSPARS
Date: 03/30/2017

Voter Information:

Voter's Name: ALLAN D LONG
Date of Birth: 06/11/1948
Voter ID: 151653012
Legacy ID:
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit:
Suffix A: A
Suffix B:
Street Number: 102
Street Name: SAND RD
Address Line 2:
Address Line 3:
Municipality : WESTWOOD
Postal City: WESTWOOD
State: NJ
Zip: 07675 2413

Party Information:

Current Party: Unaffiliated
Party Privilege Date:

Miscellaneous:

Gender: Male
Absentee Ballot Type: None
Registration Date: 12/17/2010
Registration Type: Agency with Identification
Last Action Taken Date: 08/13/2014

Status Information:

Voting Privilege Date:
Current Status: Rejected
Date Last Voted:
Rejected Reason: Not a U.S Citizen/Checked off No to U.S. Citizenship
Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Districts:

| | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|-----------------------|
| Ward | 00 | District | 04 | Congressional | 05 | Legislative 39 |
| Freeholder | | School | | Special | | Fire |

Previous Residence Addresses:

| Change Date | Street Number | Street Name | Address Line 2 | Address Line 3 | Unit | Municipality | State | Zip Code |
|-------------|---------------|-------------|----------------|----------------|------|--------------|------------|----------|
| 08/13/2014 | 102 | SAND RD | | | | WESTWOOD | New Jersey | 07675 |
| 08/05/2014 | 102 | SAND RD | | | | WESTWOOD | New Jersey | 07675 |
| 06/27/2013 | 28 | SAND RD | | | | WESTWOOD | New Jersey | 07675 |

Election History:

No Records Found for the Election History

Previous Party:

No Records Found for the Previous Party

Previous Name:

No Records Found for the Previous Name

Registration History:

No Records Found for the Registration History

146119802 New Jersey Voter Registration Application

I am applying to register to vote at the address listed on my NJ Drivers License/ID Card. I swear or affirm that:

- * I am a U.S. Citizen.
- * I reside at my DL/ID address displayed below.
- * I will be at least 18 years old on or before the next election.
- * I will have resided in the state and county at least 30 days before the next election.
- * I am not on parole, probation or serving sentence due to a conviction for an indictable offense under any federal or state laws.
- * I understand that any false or fraudulent registration may subject me to a fine up to \$15,000, imprisonment up to 5 years or both pursuant to R.S. 19:34-1.

151653012



ALLAN D LONG
102 A SAND RD
WESTWOOD NJ 07675 - 2413

2014 AUG 7 PM 2 35

VL L0201421700000177

Do you wish to declare a political party affiliation? (Optional)

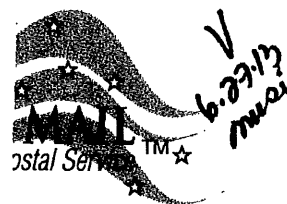
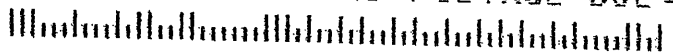
() Yes, the party name is : () No, I do not wish to be affiliated with any political party.

L6401 02664 06482 06-11-1948
ALLAN D LONG
102A SAND ROAD
WESTWOOD NJ 07675-0000 B



076 NFE 3 513C 00 06/04/13
RETURN TO SENDER POSTAGE DUE
LONG, ALLAN
102 SAND RD
WESTWOOD NJ 07675-2413

UNLESS HEAVY OR CARD-POSTAGE DUE = .46



NON-PROFIT ORG.
U.S. POSTAGE
PAID
COUNTY OF BERGEN
OFFICE OF THE
COUNTY CLERK

RETURN SERVICE REQUESTED

YOU VOTE HERE/SU VOTO AQUÍ

여기서 투표하십시오

ACCESSIBLE POLLING LOCATION

The Polling Place for this Election District is
El Lugar de Votación Para Este Distrito Electoral está en
귀하의 선거구 투표소는

BOROUGH OF WESTWOOD

WARD NO. 00 DISTRICT NO. 04

Westwood Community Center All
Purpose Room
55 Jefferson Ave

Polls Open/Las Encuestas Se Abren/ 투표소 개장시간 6 A.M. to 8 P.M.
Bergen County, NJ Tuesday, June 4, 2013
Condado de Bergen, NJ Martes, 4 de junio de 2013
뉴저지, 버겐 카운티 2013년 6월 4일 화요일

151653012



ALLAN D LONG
102 SAND RD
WESTWOOD NJ 07675

Allan D Long
28 Sand Rd
Westwood, NJ 07675-2412

A 00 04

FWD





New Jersey Voter Registration Application

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

Bergen
Clerk
EPA 12/17/10
Registration #

| | | | | | | |
|---|--|--|---|--|-----------------------|----------------------|
| 1 Check boxes that apply: | | <input checked="" type="checkbox"/> New Registration | <input type="checkbox"/> Address Change | <input type="checkbox"/> Political Party Affiliation or Non-affiliation Change | FOR OFFICIAL USE ONLY | |
| | | <input type="checkbox"/> Name Change | <input type="checkbox"/> Signature Update | | | |
| 2 Are you a U.S. Citizen? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If No, DO NOT complete this form) | | Will you be 18 years of age by the next election? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If No, DO NOT complete this form) | | | Clerk | |
| 3 Last Name | First Name | Middle Name or Initial | Suffix (Jr., Sr., III) | Registration # | | |
| LCNS | ALLAN | DAVID | | | | |
| 4 Date of Birth Month <u>06</u> Day <u>11</u> Year <u>1948</u> | | | | Office Time Stamp | | |
| 5 NJ Driver's License Number or MVC Non-driver ID Number | | If you DO NOT have a NJ Driver's License or MVC Non-Driver ID, provide the last 4 digits of your Social Security Number. | | | | |
| 1604011 026614 0614812 | | | | | | |
| <input type="checkbox"/> "I swear or affirm that I DO NOT have a NJ Driver's License, MVC Non-driver ID or a Social Security Number." | | | | | | |
| 6 Home Address (DO NOT use PO Box) | Apt. | Municipality | County | State | Zip Code | by mail in person |
| 28 SAND ROAD WEST WOOD NJ. | | | | NJ | 07675 | |
| 7 Mailing Address if different from above | Apt. | Municipality | County | State | Zip Code | |
| SAME | | | | | | |
| 8 Last Address Registered to Vote (DO NOT use PO Box) | Apt. | Municipality | County | State | Zip Code | |
| | | | | | | |
| 9 Former Name if Making Name Change | | | Day Phone Number (Optional) 201-857-4400 | | | |
| 10 Do you wish to declare a political party affiliation? (Optional) | | | <input type="checkbox"/> Yes, the party name is _____ <input checked="" type="checkbox"/> No, I do not wish to be affiliated with any political party. | | | |
| 11 Gender | Declaration - I swear or affirm that: | | | | | |
| <input type="checkbox"/> Female | <input checked="" type="checkbox"/> I am a U.S. Citizen <input checked="" type="checkbox"/> I live at the above address <input checked="" type="checkbox"/> I will be at least 18 years old on or before the next election | | | | | |
| <input checked="" type="checkbox"/> Male | <input checked="" type="checkbox"/> I will have resided in the State and county at least 30 days before the next election <input checked="" type="checkbox"/> I am not on parole, probation or serving a sentence due to a conviction for an indictable offense under any federal or state laws | | | | | |
| <input checked="" type="checkbox"/> I understand that any false or fraudulent registration may subject me to a fine of up to \$15,000, imprisonment up to 5 years, or both pursuant to R.S. 19:34-1 | | | | | | |
| Signature: Sign or mark and date on lines below | | | | | | |
|  | | | | | | |
| Date <u>09/16/10</u> | | | | | | |
| 151653012  ALLAN D LONG 28 SAND RD WESTWOOD NJ 07675 | | | | | | |

Important Instructions for sections 5, 6 and 10

- 5) Registrants who are submitting this form by mail and are registering to vote for the first time: If you do not have any of the information required by section 5, or the information you provide cannot be verified, you will be asked to provide a COPY of a current and valid photo ID, or a document with your name and current address on it to avoid having to provide identification at the polling place.

Note: ID Numbers are Confidential and will not be released by any governmental agency. Any person who uses such numbers illegally shall be subject to criminal penalties.

- 6) If you are homeless, you may complete section 6 by providing a contact point or the location where you spend most of your time.
- 10) You may declare a political affiliation or you may declare to be unaffiliated, regardless of any prior party affiliation. Completing section 10 is OPTIONAL and will not affect the acceptance of your voter registration application.

Need More Information? Check boxes below if you would like to receive more information about:

☐ absentee voting
☐ becoming a poll worker

☐ polling place accessibility
☐ voting if you have a disability including visual impairment

☐ available election materials in this alternative language

For further information visit www.NJElections.org or call toll-free 1-877-NJ-VOTER (1-877-658-6837)

Not Q42 11.4.16 ~~at~~

SUPERINTENDENT
OF ELECTIONS
BERGEN COUNTY, N.J.
2016 NOV -4 PM 4:40

ALLAN D. LONG
6/06/1948
I am not a U.S. Citizen ^{at}
102-A SAND ROAD.
WESTWOOD N.J.
07675.



151653012



ALLAN D LONG
102 A SAND RD
WESTWOOD NJ 07675 - 2413

Voter Profile

User Printed: BESPTOGU
Date: 03/30/2017

Voter Information:

Voter's Name: OLIVER E LORA-LOPEZ
Date of Birth: 10/10/1980
Voter ID: 523806647
Legacy ID:
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit: 3E
Suffix A:
Suffix B:
Street Number: 444
Street Name: TERRACE AVE
Address Line 2:
Address Line 3:
Municipality : HASBROUCK
HEIGHTS
Postal City: HASBROUCK
HEIGHTS
State: NJ
Zip: 07604

Party Information:

Current Party: Democratic*
Party Privilege Date:

Miscellaneous:

Gender: Male
Absentee Ballot Type: None
Registration Date: 09/05/2015
Registration Type: Agency with
Identification
Last Action Taken Date: 09/18/2015

Status Information:

Voting Privilege Date:
Current Status: Rejected
Date Last Voted:
Rejected Reason: Not a U.S Citizen/Checked off No
to U.S. Citizenship
Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Districts:

| | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|-----------------------|
| Ward | 00 | District | 08 | Congressional | 09 | Legislative 38 |
| Freeholder | | School | | Special | | Fire |

Previous Residence Addresses:

| Change Date | Street Number | Street Name | Address Line 2 | Address Line 3 | Unit | Municipality | State | Zip Code |
|-------------|---------------|-----------------|----------------|----------------|------|---------------|------------|----------|
| 09/09/2015 | | 444 TERRACE AVE | | | | HASBROUCK HTS | New Jersey | 07604 |

Election History:

No Records Found for the Election History

Previous Party:

| Date Changed | Party Privilege Date | Party Name |
|--------------|----------------------|--------------|
| 09/17/2015 | 09/17/2015 | Unaffiliated |

Previous Name:

No Records Found for the Previous Name

Registration History:

No Records Found for the Registration History

Main Menu: Yes No

Activities

Voter Registration

Add/Change Voter
Voter With No DOB
Voter Address Change
Confirmation
MVC - Agency
MVC File Online Voter

Maintain Voter History

Elections

System

Batch Scanning

MVC DL Search

Inquiries

Help

Logout

S SEP 09 2015

Compare MVC - Agency

Incomp 105 9/9/15

BESPTOGU / B

| MVC Voter | | | |
|-------------------------|---|----------------------------------|--|
| Name | OLIVER E LORA-LOPEZ | Date of Birth | 10/10/1980 |
| Residence Address | 444 TERRACE AVE APT 3E HASBROUCK HTS NJ 07604-2133 | Mailing Address | |
| Driver's License Number | L65526036510802 | Original Driver's License Number | L65526036510802 |
| Card Number | | Previous DOB | 10/10/1980 |
| Previous Name | OLIVER E LORA-LOPEZ | Previous Address | 444 TERRACE AVE HASBROUCK HTS NJ 07604-2130 |
| MVC Transaction Date | 09/05/2015 | | |

MVC Signature Date: 09/05/2015

Reject ☐ English:☒ Spanish:

Reject

No Card Issued

| SVRS Matched Voters | | | | | | | | | | |
|---|----------|------|---------------|-------------------|-------------------|-----------------|-------------------------|-----|-------------------|------|
| Select | Voter Id | Name | Date of Birth | Registration Date | Residence Address | Mailing Address | Driver's License Number | SSN | Confidence Factor | Stat |
| No Matching records Found. You can either choose to take No Action, Add or Reject this Motor Voter by clicking on the re buttons. | | | | | | | | | | |

* under Status Reason indicates voter has multiple status reasons.

523806647



OLIVER E LORA-LOPEZ
444 TERRACE AVE Apt-Unit 3E
HASBROUCK HEIGHTS NJ 07604

tched statewide.

i) matched statewide.

: of First Name, DOB (including 01/01/1900) matched statewide.
hange.




New Jersey

Voter Registration Application

76

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

off ore PC
Attn: Kathy/MVC

| | | | | | | |
|---|--|---|---|--|------------------------------|--|
| 1 Check boxes that apply: | | <input type="checkbox"/> New Registration | <input type="checkbox"/> Address Change | <input type="checkbox"/> Political Party Affiliation | FOR OFFICIAL USE ONLY | |
| | | <input type="checkbox"/> Name Change | <input checked="" type="checkbox"/> Signature Update or Non-affiliation Change | | | |
| 2 Are you a U.S. Citizen? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If No, DO NOT complete this form) | | Will you be 18 years of age by the next election? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If No, DO NOT complete this form) | | | Clerk 523806647 | |
| 3 Last Name LORA LOPEZ | First Name OLIVER | Middle Name or Initial E | Suffix (Jr., Sr., III) | Registration # 9/18/15 | | |
| 4 Date of Birth OCTOBER 10th, 1980 | | Office Time Stamp | | | | |
| 5 NJ Driver's License Number or MVC Non-driver ID Number L65526036510802 | | If you DO NOT have a NJ Driver's License or MVC Non-Driver ID, provide the last 4 digits of your Social Security Number. | | | | |
| <input type="checkbox"/> "I swear or affirm that I DO NOT have a NJ Driver's License, MVC Non-driver ID or a Social Security Number." | | | | | | |
| 6 Home Address (DO NOT use PO Box) 444 TERRACE AVE | Apt. 3E | Municipality HASBROUCK HEIGHTS | County BERGEN | State NJ | Zip Code 07604 | |
| 7 Mailing Address if different from above | Apt. | Municipality | County | State | Zip Code | |
| 8 Last Address Registered to Vote (DO NOT use PO Box) | Apt. | Municipality | County | State | Zip Code | |
| 9 Former Name if Making Name Change | | a. Day Phone Number (Optional) (201) 257-5262 | | | | |
| | | b. E-Mail Address (Optional) POLORA10@AOL.COM | | | | |
| 10 Do you wish to declare a political party affiliation? <input checked="" type="checkbox"/> Yes, the party name is DEMOCRATS (Optional) <input type="checkbox"/> No, I do not wish to be affiliated with any political party. | | | | | | |
| 11 Gender <input type="checkbox"/> Female <input checked="" type="checkbox"/> Male | Declaration - I swear or affirm that: <input checked="" type="checkbox"/> I am a U.S. Citizen <input checked="" type="checkbox"/> I live at the above address <input checked="" type="checkbox"/> I will be at least 18 years old on or before the next election <input type="checkbox"/> I will have resided in the State and county at least 30 days before the next election. <input type="checkbox"/> I am not on parole, probation or serving a sentence due to a conviction for an indictable offense under any federal or state laws <input type="checkbox"/> I understand that any false or fraudulent registration may subject me to a fine of up to \$15,000, imprisonment up to 5 years, or both pursuant to R.S. 19:34-1 | | | | | |
| Signature: Sign or mark and date on lines below | | | If applicant is unable to complete this form, print the name and address of individual who completed this form. | | | |
|  | | | Name _____ | | | |
| Date 09/12/2015 | | | Date _____ | | | |
| X | | | Address _____ | | | |

Important Instructions for sections 5, 6 and 10

5)

523806647

OLIVER E LORA-LOPEZ
444 TERRACE AVE Apt-Unit 3E
HASBROUCK HEIGHTS NJ 07604

6)

10)

ng to vote for the first time: If you do not have any of the information verified, you will be asked to provide a COPY of a current and valid ID to avoid having to provide identification at the polling place.

any governmental agency. Any person who uses such numbers

a contact point or the location where you spend most of your time.

to be unaffiliated, regardless of any prior party affiliation. If you are

55 days before the primary election in order to vote in the primary election. Completing section 10 is OPTIONAL and does not affect the acceptance of your voter registration application.

Need More Information? Check boxes below if you would like to receive more information about:

☒ voting by mail☐ becoming a poll worker☐ polling place accessibility☐ voting if you have a disability,
including visual impairment☐ available election materials in
this alternative language:For further information visit Elections.NJ.gov or call toll-free 1-877-NJVOTER (1-877-658-6837)

Voter Profile

User Printed: BESOEAD2
Date: 03/29/2017

Voter Information:

Voter's Name: KERLY G LUCIO
Date of Birth: 11/20/1975
Voter ID: 152393926
Legacy ID:
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit:
Suffix A:
Suffix B:
Street Number: 0-28
Street Name: E AMSTERDAM AVE
Address Line 2:
Address Line 3:
Municipality : FAIR LAWN
Postal City: FAIR LAWN
State: NJ
Zip: 07410

Party Information:

Current Party: Unaffiliated
Party Privilege Date: 10/08/2012

Miscellaneous:

Gender: Not Entered
Absentee Ballot Type: None
Registration Date: 09/17/2012
Registration Type: Agency with Identification
Last Action Taken Date: 11/27/2012

Status Information:

Voting Privilege Date: 10/08/2012
Current Status: Deleted
Date Last Voted:
Deleted Date: 11/27/2012
Deleted Reason: Administrative Action
Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Districts:

| Ward | District | Congressional | Legislative |
|------------|----------|---------------|-------------|
| 00 | 01 | 05 | 38 |
| Freeholder | School | Special | Fire |

Previous Residence Addresses:

| Change Date | Street Number | Street Name | Address Line 2 | Address Line 3 | Unit | Municipality | State | Zip Code |
|-------------|---------------|-------------------|----------------|----------------|------|--------------|------------|----------|
| 10/03/2012 | | 126 MAIN AVE FL 2 | | | | ELMWOOD PARK | New Jersey | 07407 |

Election History:

No Records Found for the Election History

Previous Party:

No Records Found for the Previous Party

Previous Name:

No Records Found for the Previous Name

Registration History:

No Records Found for the Registration History

Miscellaneous Memo

**BESOEAD2 /
BERGEN**

Memo :

not a U S Citizen per voter
(mvc)

Close

Main Menu:

Activities

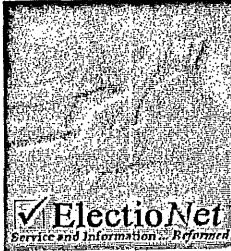
Voter Registration
Maintain Voter History
Maintain County Data
Elections
System
Poll Book Printing Schedule
Duplicate Voters
Batch Scanning
Messaging
MVC DL Search
Backend Reporting
Document Imaging

Inquiries

Reports

Help

Logout



Add 10/3/12

Compare MVC - Agency

BESOEAD2 / BERGEN

| MVC Voter | | | | |
|-------------------------|---|--|----------------------------------|---|
| Name | KERLY G LUCIO | | Date of Birth | 11/20/1975 |
| Residence Address | 0-28 E AMSTERDAM AVE FAIR LAWN NJ 07410-4632 | | Mailing Address | |
| Driver's License Number | L90594326761752 | | Original Driver's License Number | L90594326761752 |
| Card Number | | | Previous DOB | 11/20/1975 |
| Previous Name | KERLY G LUCIO | | Previous Address | 126 MAIN AVE FL 2 ELMWOOD PARK NJ 07407-3202 |
| MVC Transaction Date | 09/17/2012 | | | |

MVC Signature Date:

Reject ☐ English:

Spanish:

Reject

Reject
Signature
Importing

| SVRS Matched Voters | | | | | | | | | | | |
|---|----------|------|---------------|-------------------|-------------------|-----------------|-------------------------|-----|-------------------|--------|---------------|
| Select | Voter Id | Name | Date of Birth | Registration Date | Residence Address | Mailing Address | Driver's License Number | SSN | Confidence Factor | Status | Status Reason |
| No Matching records Found. You can either choose to take No Action, Add or Reject this Motor Voter by clicking on the respective buttons. | | | | | | | | | | | |

* under Status Reason indicates voter has multiple status reasons.

Select

Add Back

No Action Required

Print List

Display Signature

152393926



KERLY G LUCIO
0-28 E AMSTERDAM AVE
FAIR LAWN NJ 07410

hed statewide.

matched statewide.

if First Name, DOB (including 01/01/1800) matched statewide.
nge.

Main Menu:

Activities

Voter Registration
Maintain Voter History
Maintain County Data
Elections
System
Poll Book Printing Schedule
Duplicate Voters
Batch Scanning
Messaging
MVC DL Search
Backend Reporting
Document Imaging

Inquiries

Reports

Help

Logout

Compare MVC - Agency

BESOEAD2 / BERGEN

Add 10/3/12 *Deleted. Not a citizen*

| MVC Voter | | | |
|-------------------------|---|----------------------------------|---|
| Name | KERLY G LUCIO | Date of Birth | 11/20/1975 |
| Residence Address | 0-28 E AMSTERDAM AVE FAIR LAWN NJ 07410-4632 | Mailing Address | |
| Driver's License Number | L90594326761752 | Original Driver's License Number | L90594326761752 |
| Card Number | | Previous DOB | 11/20/1975 |
| Previous Name | KERLY G LUCIO | Previous Address | 126 MAIN AVE FL 2 ELMWOOD PARK NJ 07407-3202 |
| MVC Transaction Date | 09/17/2012 | | |

MVC Signature Date:

Reject ☐ English:☒ Spanish:

Reject

Reject
Signature
from
Importing

| SVRS Matched Voters | | | | | | | | | | |
|---|----------|------|---------------|-------------------|-------------------|-----------------|-------------------------|-----|-------------------|---------------|
| Select | Voter Id | Name | Date of Birth | Registration Date | Residence Address | Mailing Address | Driver's License Number | SSN | Confidence Factor | Status Reason |
| No Matching records Found. You can either choose to take No Action, Add or Reject this Motor Voter by clicking on the respective buttons. | | | | | | | | | | |

* under Status Reason Indicates voter has multiple status reasons.

Select

Add

Back

No Action Required

Print List

Display Signature

152393926



KERLY G LUCIO
0-28 E AMSTERDAM AVE
FAIR LAWN NJ 07410

hed statewide.

matched statewide.

if First Name, DOB (including 01/01/1800) matched statewide.
inge.

I am not a citizen, I didn't remember this form, that was a mistake
sign
11/27/12

2012 NOV 27 PM 9 57

SUPERINTENDENT
OF ELECTIONS
BERGEN COUNTY, N.J.

Voter Profile

User Printed: BESPTOGU

Date: 03/30/2017

Voter Information:

Voter's Name: CHEN LUO

Date of Birth: 11/20/1969

Voter ID: 152814575

Legacy ID:

Archived Legacy ID:

Residence Address:

County: BERGEN

Unit:

Suffix A:

Suffix B:

Street Number: 910

Street Name: WILLOW
AVE

Address Line 2:

Address Line 3:

Municipality : RIVER
EDGE

Postal City: RIVER EDGE

State: NJ

Zip: 07661

Party Information:

Current Party: Unaffiliated

Party Privilege Date:

Miscellaneous:

Gender: Not Entered

Absentee Ballot Type: None

Registration Date: 08/04/2014

Registration Type: Agency with
Identification

Last Action Taken Date: 08/12/2014

Status Information:

Voting Privilege Date:

Current Status: Rejected

Date Last Voted:

Rejected Reason: Not a U.S Citizen/Checked off No to
U.S. Citizenship

Poll Worker Status:

Mailing Address:

Street Number:

Suffix A:

Suffix B:

Street Name/P.O. Box:

Unit:

Address Line 2:

Address Line 3:

City:

State:

Zip Code:

Country:

Inactive Confirmation Address:

Street Number:

Suffix A:

Suffix B:

Street Name/P.O. Box:

Unit:

Address Line 2:

Address Line 3:

City:

State:

Zip Code:

Country:

Districts:

| | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|-----------------------|
| Ward | 00 | District | 01 | Congressional | 05 | Legislative 38 |
| Freeholder | | School | | Special | | Fire |

Previous Residence Addresses:

No Records Found for the Previous Residence Addresses

Election History:

No Records Found for the Election History

Previous Party:

No Records Found for the Previous Party

Previous Name:

No Records Found for the Previous Name

Registration History:

No Records Found for the Registration History

146119653

New Jersey Voter Registration Application

I am applying to register to vote at the address listed on my NJ Drivers License/ID Card. I swear or affirm that:

- * I am a U.S. Citizen.
- * I reside at my DL/ID address displayed below.
- * I will be at least 18 years old on or before the next election.
- * I will have resided in the state and county at least 30 days before the next election.
- * I am not on parole, probation or serving sentence due to a conviction for an indictable offense under any federal or state laws.
- * I understand that any false or fraudulent registration may subject me to a fine up to \$15,000, imprisonment up to 5 years or both pursuant to R.S. 19:34-1.

Do you wish to declare a political party affiliation? (Optional)

() Yes, the party name is : _____

() No, I do not wish to be affiliated with any political party.

L9314 12200 11692 11-20-1969
CHEN LUO
910 WILLOW AVE
RIVER EDGE NJ 07661-1623 B

NEW JERSEY

152814575



CHEN LUO
910 WILLOW AVE
RIVER EDGE NJ 07661

LL LO201421600000190

x

NEW JERSEY METRO P&DC 076
If not delivered in two days, return to
Superintendent of Elections
1 Bergen County Plaza,
Room 380
Hackensack, NJ 07601
Tel: 201-336-6115

RETURN SERVICE REQUESTED

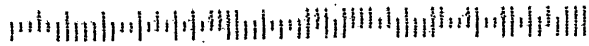
OFFICIAL
ELECTION MAIL
Authorized by the U.S. Postal Service
0006556055 AUG 11 2014
MAILED FROM ZIP CODE 07601
County of Bergen, New Jersey
Voter Acknowledgement Card
Recibo de tarjeta de votantes
유권자 확인 카드

152814575 M-0252 W-00 D-01
CHEN LUO
910 WILLOW AVE
RIVER EDGE NJ 07661

152814575

08/04/2014

0252 00 01



IMPORTANT

If your address changes, return this card to your County Commissioner of Registration, not later than twenty one days before any election, giving your new address below.

IMPORTANTE

Si hay un cambio en su dirección, regresa esta tarjeta a su Registro del Comisionado del Condado no mas tardar de veinte uno días antes de la elección, dando su nueva dirección abajo.

중요
BERGEN COUNTY, N.J.

주소 변경 시 아래에 새 주소를 기입한 후 이 카드를 선거일 21일 이전까지 카운티 등록 위원장 앞으로 반송하여 주십시오.

On/En/본인은 20

2014 SEP 11 AM 1 49

, 20/년, I moved to/me mudé a/일에 다음의

주소로 이사하였습니다.

Street/Calle/주소

Municipality/Municipio/시

Signature/Firma/서명

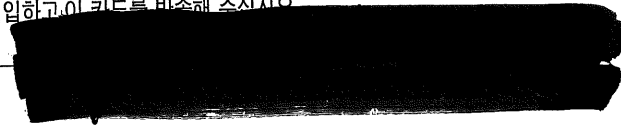
I am not U.S. Citizen

In case of death, it is requested that some surviving relative return this card with the date of death shown here.

En caso de muerte, se solicita que algunos sobrevivientes de retorno en relación con esta tarjeta la fecha de la muerte se muestra aquí.

본인 유고 시, 유족께서 이 아래에 사망일자를 기입하고 이 카드를 반송해 주십시오

09/08/2014 Signature/Firma/서명



Fr: Chen Luo

910 Willow Ave,

River Edge, NJ 07661

MMJ METRO P&C 076

10 SEP 2014 PM 2 T

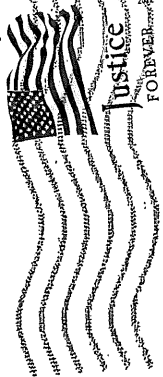
SUPERINTENDENT
OF ELECTIONS
BERGEN COUNTY, N.J.

Superintendent of Elections

2014 SEP 11 AM 11 Bergen County Plaza

Room 380

Hackensack, NJ 07601



0760137061



PATRICIA DI COSTANZO
SUPERINTENDENT OF ELECTIONS
COMMISSIONER OF REGISTRATION

BERGEN COUNTY
SUPERINTENDENT OF ELECTIONS
ONE BERGEN COUNTY PLAZA, ROOM 380
HACKENSACK, N. J. 07601
PHONE: (201) 336-6100
FAX: (201) 336-6111

THERESA M. O'CONNOR
DEPUTY SUPERINTENDENT OF ELECTIONS
DEPUTY COMMISSIONER OF REGISTRATION

September 12, 2014

Chen Luo
910 Willow Avenue
River Edge, NJ 07661

Dear Chen Luo:

We have received your correspondence stating that you are not a US citizen and should not have been registered to vote.

We have removed your name from the voter rolls.

Sincerely,

A handwritten signature in cursive script that reads "Patricia DiCostanzo".

Patricia DiCostanzo
Superintendent of Elections

Voter Profile

User Printed: BESSPARS
Date: 03/30/2017

Voter Information:

Voter's Name: SLAWOMIR MAJOCH
Date of Birth: 02/02/1976
Voter ID: 152359135
Legacy ID:
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit: 1
Suffix A:
Suffix B:
Street Number: 354
Street Name: SADDLE RIVER RD
Address Line 2:
Address Line 3:
Municipality : SADDLE BROOK
Postal City: SADDLE BROOK
State: NJ
Zip: 07663

Party Information:

Current Party: Unaffiliated
Party Privilege Date:

Miscellaneous:

Gender: Male
Absentee Ballot Type: None
Registration Date: 07/30/2012
Registration Type: Agency with Identification
Last Action Taken Date: 02/15/2017

Status Information:

Voting Privilege Date:
Current Status: Rejected
Date Last Voted:
Rejected Reason: Not a U.S Citizen/Checked off No to U.S. Citizenship
Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number: 418
Suffix A:
Suffix B:
Street Name/P.O. Box: VALLEY RD
Unit:
Address Line 2:
Address Line 3:
City: MONTCLAIR
State: NJ
Zip Code: 07043 1725
Country: UNITED STATES

Districts:

| | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|-----------------------|
| Ward | 00 | District | 06 | Congressional | 09 | Legislative 38 |
| Freeholder | | School | | Special | | Fire |

Previous Residence Addresses:

| Change Date | Street Number | Street Name | Address Line 2 | Address Line 3 | Unit | Municipality | State | Zip Code |
|-------------|---------------|------------------|----------------|----------------|------|--------------|------------|----------|
| 09/18/2012 | | 157B NORWOOD AVE | | | | LODI | New Jersey | 07644 |

Election History:

No Records Found for the Election History

Previous Party:

No Records Found for the Previous Party

Previous Name:

No Records Found for the Previous Name

Registration History:

No Records Found for the Registration History

Polling Place:
Next Election Date -- Name
Polling Place

06/06/2017 -- PRIMARY ELECTION

Name

HIGH SCHOOL LOBBY

Address

355 MAYHILL ST

SADDLE BROOK NJ 07663

Main Menu:

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Voter Registration

Add/Change Voter
 Voter With No DOB
 Voter Address Change
 Confirmation
 Voter Address Change
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 MVC File Online Voter
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 Verification / Postal Notice
 Verif. and Ack. Card Export
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Logout

Compare MVC - Agency

BESOEAD2 / BERGEN

MVC Voter

| | | | |
|--------------------------------|--|---|--|
| Name | SLAWOMIR MAJOCH | Date of Birth | 02/02/1976 |
| Residence Address | 354 SADDLE RIVER RD 1ST FL SADDLE BROOK NJ 07663-4620 | Mailing Address | |
| Driver's License Number | M02067170002765 | Original Driver's License Number | M02067170002765 |
| Card Number | | Previous DOB | 02/02/1976 |
| Previous Name | SLAWOMIR MAJOCH | Previous Address | 157B NORWOOD AVE LODI NJ 07644-6032 |
| MVC Transaction Date | 07/30/2012 | | |

Reject ☐ English:☒ Spanish:

Reject

SVRS Matched Voters

| Select | Voter Id | Name | Date of Birth | Registration Date | Residence Address | Mailing Address | Driver's License Number | SSN | Confidence Factor | Status | Status Reason |
|---|----------|------|---------------|-------------------|-------------------|-----------------|-------------------------|-----|-------------------|--------|---------------|
| No Matching records Found. You can either choose to take No Action, Add or Reject this Motor Voter by clicking on the respective buttons. | | | | | | | | | | | |

* under Status Reason indicates voter has multiple status reasons.

Note:

If status is blank, that implies the voter status is Active.

If Confidence Factor is 100 %, that implies Driver's License Number is matched statewide.

If Confidence Factor is 50 %, that implies Last Name, First Name, DOB (or)

Last Name, First Name, First Letter of Middle Name and DOB (01/01/1800) matched statewide.

If Confidence Factor is 25 %, that implies Soundex of Last Name, Soundex of First Name, DOB (including 01/01/1800) matched statewide.

Name matching process includes MVC previous names if there is a name change.

152359135



SLAWOMIR MAJOCH
 354 SADDLE RIVER RD Apt-Unit 1
 SADDLE BROOK NJ 07663



* 076 NDE 330111618605/31/16
RETURN TO SENDER POSTAGE DUE
MAJOCH
418 VALLEY RD
MONTCLAIR NJ 07043-1725

RETURN TO SENDER POSTAGE DUE = \$.
[Barcode]

선거구 투표소

ACCESSIBLE POLLING LOCATION

The Polling Place for this Election District is
El Lugar de Votación Para Este Distrito Electoral está en
귀하의 선거구 투표소는

TOWNSHIP OF SADDLE BROOK

WARD NO: 00 DISTRICT NO: 06

High School Lobby
355 Mayhill St

Slawomir Majoch A 00 06
354 Saddle River Rd # 1
Saddle Brook, NJ 07663-4620

Polls Open/Las Urnas Se Abren/ 투표소 개장시간 6 A.M. to 8 P.M.
Bergen County, NJ Tuesday, June 7, 2016
Condado de Bergen, NJ Martes, 7 de junio de 2016
뉴저지, 버겐 카운티 2016 년 6 월 7 일 화요일



8/3/16

NON-PROFIT ORG.
U.S. POSTAGE
PAID
COUNTY OF BERGEN
OFFICE OF THE
COUNTY CLERK

RETURN SERVICE REQUESTED

152359135



SLAWOMIR MAJOCH
354 SADDLE RIVER RD Apt-Unit 1
SADDLE BROOK NJ 07663



BERGEN COUNTY
SUPERINTENDENT OF ELECTIONS
ONE BERGEN COUNTY PLAZA, ROOM 380
HACKENSACK, N. J. 07601
PHONE: (201) 336-6100
FAX: (201) 336-6111

PATRICIA DI COSTANZO
SUPERINTENDENT OF ELECTIONS
COMMISSIONER OF REGISTRATION

THERESA M. O'CONNOR
DEPUTY SUPERINTENDENT OF ELECTIONS
DEPUTY COMMISSIONER OF REGISTRATION

February 15, 2017

Slawomir Majoch
418 Valley Road
Montclair, NJ 07043

DOB: 02/02/1976

Dear Mr. Majoch:

You registered to vote July 30, 2012 thru MVC. The record reflects that you never voted.

A certified copy of your voter profile, showing you were removed from the rolls
February 15, 2017, per your request, is enclosed.

If you have any questions, please do not hesitate to call this office.

Sincerely,

A handwritten signature in black ink, appearing to read "P. DiCostanzo".

Patricia DiCostanzo
Superintendent of Elections

2/15/17

SUPERINTENDENT
OF ELECTIONS
BERGEN COUNTY, N.J.

2017 FEB 15 PM 12:39

SLAWOMIR MAJUCH

418 VALLEY RD 1R

MONTCLAIR, NEW JERSEY 07043

DOB. 02/02/1976

PLEASE REMOVE ME FROM VOTERS
REGISTRY AS IM NOT U.S. CITIZEN.

[REDACTED]

152359135



SLAWOMIR MAJUCH
354 SADDLE RIVER RD Apt-Unit 1
SADDLE BROOK NJ 07663

Voter Profile

User Printed: BESOEAD2
Date: 03/29/2017

Voter Information:

Voter's Name: DIASKARA J MATEOSEGURA
Date of Birth: 10/20/1980
Voter ID: 536375066
Legacy ID:
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit:
Suffix A:
Suffix B:
Street Number: 63
Street Name: TYSON PL
Address Line 2:
Address Line 3:
Municipality : BERGENFIELD
Postal City: BERGENFIELD
State: NJ
Zip: 07621

Party Information:

Current Party: Unaffiliated
Party Privilege Date:

Miscellaneous:

Gender: Female
Absentee Ballot Type: None
Registration Date: 01/03/2017
Registration Type: Agency with Identification
Last Action Taken Date: 02/15/2017

Status Information:

Voting Privilege Date:
Current Status: Rejected
Date Last Voted:
Rejected Reason: Not a U.S Citizen/Checked off No to U.S. Citizenship
Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Districts:

| | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|-----------------------|
| Ward | 00 | District | 17 | Congressional | 05 | Legislative 38 |
| Freeholder | | School | | Special | | Fire |

Previous Residence Addresses:

No Records Found for the Previous Residence Addresses

Election History:

No Records Found for the Election History

Previous Party:

No Records Found for the Previous Party

Previous Name:

No Records Found for the Previous Name

Registration History:

No Records Found for the Registration History

Activities

Voter Registration

Add/Change Voter
Voter With No DOB
Voter Address Change
Confirmation
Voter Address Change
Confirmation Export

MVC - Agency

MVC File Online Voter
Voters who have
Verification / Postal Notice
Verif. and Ack. Card Export
MVC Manual Update

Maintain Voter History

Maintain County Data

Elections

System

Poll Book Printing Schedule

Duplicate Voters

Batch Scanning

Messaging

MVC DL Search

Backend Reporting

Document Imaging

Handheld Scanning

Inquiries

Reports

Help

Logout

Compare MVC - Agency

BESOEAD2 / BERGEN

| MVC Voter | | | | |
|-------------------------|--|--|----------------------------------|------------|
| Name | DIASKARA J MATEOSEGURA | | Date of Birth | 10/20/1980 |
| Residence Address | 63 TYSON PL BERGENFIELD NJ 07621-1639 | | Mailing Address | |
| Driver's License Number | M07971687160802 | | Original Driver's License Number | |
| Card Number | | | Previous DOB | |
| Party | UNA | | Previous Address | |
| MVC Transaction Date | 01/03/2017 | | | |

MVC Signature Date: 01/03/2017

Reject ☐ English:

Spanish:

Reject

Reject
Signature
from
Importing

| SVRS Matched Voters | | | | | | | | | | | | |
|---|----------|------|---------------|-------------------|-------------------|-----------------|-------------------------|-------|-----|-------------------|--------|---------------|
| Select | Voter Id | Name | Date of Birth | Registration Date | Residence Address | Mailing Address | Driver's License Number | Party | SSN | Confidence Factor | Status | Status Reason |
| No Matching records Found. You can either choose to take No Action, Add or Reject this Motor Voter by clicking on the respective buttons. | | | | | | | | | | | | |

* under Status Reason indicates voter has multiple status reasons.

Note:

If status is blank, that implies the voter status is Active.

If Confidence Factor is 100 %, that implies Driver's License Number is matched statewide.

If Confidence Factor is 50 %, that implies Last Name, First Name, DOB (or)

Last Name, First Name, First Letter of Middle Name and DOB (01/01/1800) matched statewide.

If Confidence Factor is 25 %, that implies Soundex of Last Name, Soundex of First Name, DOB (including 01/01/1800) matched statewide.

Name matching process includes MVC previous names if there is a name change.



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1.7.11

536375066




DIASKARA J MATEOSEGURA
63 TYSON PL
BERGENFIELD NJ 07621



New Jersey Voter Registration Application

76

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

| | | | | | | | | | |
|--|--|---|--|--|--|--|--|---|--|
| 1 Check boxes that apply: <input type="checkbox"/> New Registration <input type="checkbox"/> Address Change <input type="checkbox"/> Political Party Affiliation or Non-affiliation Change <input type="checkbox"/> Name Change <input type="checkbox"/> Signature Update | | | | FOR OFFICIAL USE ONLY Clerk <i>Not Cite</i> <i>23.173</i> | | | | | |
| 2 Are you a U.S. Citizen? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If No, DO NOT complete this form) | | Are you at least 17 years of age? <input type="checkbox"/> Yes <input type="checkbox"/> No (If No, DO NOT complete this form) | | | | | | | |
| 3 Last Name <i>Mateo Segura</i> | | First Name <i>Diaskara</i> | | Middle Name or Initial _____ | | Suffix (Jr., Sr., III) _____ | | Registration # _____ | |
| 4 Date of Birth <i>10/20/1980</i> | | Office Time Stamp | | | | | | | |
| 5 NJ Driver's License Number or MVC Non-driver ID Number _____ If you DO NOT have a NJ Driver's License or MVC Non-Driver ID, provide the last 4 digits of your Social Security Number. _____ <input type="checkbox"/> "I swear or affirm that I DO NOT have a NJ Driver's License, MVC Non-driver ID or a Social Security Number." | | | | 2017 MAR - 3 AM 4:29 SUPERINTENDENT OF ELECTIONS BERGEN COUNTY, NJ | | | | | |
| 6 Home Address (DO NOT use PO Box) <i>63 Tyson Place</i> | | Apt. _____ | | Municipality <i>Bergenfield</i> | | County <i>Bergen</i> | | State <i>NJ</i> Zip Code <i>07621</i> | |
| 7 Mailing Address if different from above _____ | | Apt. _____ | | Municipality _____ | | County _____ | | State _____ Zip Code _____ | |
| 8 Last Address Registered to Vote (DO NOT use PO Box) _____ | | Apt. _____ | | Municipality _____ | | County _____ | | State _____ Zip Code _____ | |
| 9 Former Name if Making Name Change _____ | | | | a. Day Phone Number (Optional) _____ | | | | <input type="checkbox"/> mail <input checked="" type="checkbox"/> in person | |
| | | | | b. E-Mail Address (Optional) _____ | | | | | |
| 10 Do you wish to declare a political party affiliation? <input type="checkbox"/> Yes, the party name is _____ (Optional) <input type="checkbox"/> No, I do not wish to be affiliated with any political party. | | | | | | | | | |
| 11 Gender <input checked="" type="checkbox"/> Female <input type="checkbox"/> Male | | Declaration - I swear or affirm that: • I am a U.S. Citizen • I live at the above address • I am at least 17 years old, and understand that I may not vote until reaching the age of 18. • I will have resided in the State and county at least 30 days before the next election • I am not on parole, probation or serving a sentence due to a conviction for an indictable offense under any federal or state laws • I understand that any false or fraudulent registration may subject me to a fine of up to \$15,000, imprisonment up to 5 years, or both pursuant to R.S. 19:34-1 | | | | | | | |
| Signature: Sign or mark and date on lines below  Date <i>3-3-2017</i> | | | | | | If applicant is unable to complete this form, print the name and address of individual who completed this form. Name _____ Date _____ Address _____ | | | |

536375066



DIASKARA J MATEOSEGURA
63 TYSON PL
BERGENFIELD NJ 07621

is 5, 6 and 10

registering to vote for the first time: If you do not have any of the information not be verified, you will be asked to provide a COPY of a current and valid address on it to avoid having to provide identification at the polling place.

used by any governmental agency. Any person who uses such numbers

providing a contact point or the location where you spend most of your time.

- 10) You may declare a political party affiliation or you may declare to be unaffiliated, regardless of any prior party affiliation. If you are a previously affiliated voter who wants to change political party affiliation or become unaffiliated, you must file this form no later than 55 days before the primary election in order to vote in the primary election. Completing section 10 is OPTIONAL and will not affect the acceptance of your voter registration application.

Need More Information? Check boxes below if you would like to receive more information about:

- ☐ voting by mail
☐ becoming a poll worker

- ☐ polling place accessibility
☐ voting if you have a disability, including visual impairment

- ☐ available election materials in this alternative language:

For further information visit Elections.NJ.gov or call toll-free 1-877-NJVOTER (1-877-658-6837)

Voter Profile

User Printed: BESOEAD2
Date: 03/30/2017

Voter Information:

Voter's Name: MICKAEL J MENDONCA
Date of Birth: 03/20/1992
Voter ID: 152654890
Legacy ID:
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit:
Suffix A:
Suffix B:
Street Number: 13-14
Street Name: FAIRHAVEN PL
Address Line 2:
Address Line 3:
Municipality : FAIR LAWN
Postal City: FAIR LAWN
State: NJ
Zip: 07410

Party Information:

Current Party: Unaffiliated
Party Privilege Date:

Miscellaneous:

Gender: Not Entered
Absentee Ballot Type: None
Registration Date: 08/07/2013
Registration Type: Agency with Identification
Last Action Taken Date: 08/26/2013

Status Information:

Voting Privilege Date:
Current Status: Rejected
Date Last Voted:
Rejected Reason: Not a U.S Citizen/Checked off No to U.S. Citizenship
Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Districts:

| | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|-----------------------|
| Ward | 00 | District | 17 | Congressional | 05 | Legislative 38 |
| Freeholder | | School | | Special | | Fire |

Previous Residence Addresses:

No Records Found for the Previous Residence Addresses.

Election History:

No Records Found for the Election History

Previous Party:

No Records Found for the Previous Party

Previous Name:

No Records Found for the Previous Name

Registration History:

No Records Found for the Registration History

141189292 New Jersey Voter Registration Application

I am applying to register to vote at the address listed on my NJ Drivers License/ID Card. I swear or affirm that:

- * I am a U.S. Citizen.
- * I reside at my DL/ID address displayed below.
- * I will be at least 18 years old on or before the next election.
- * I will have resided in the state and county at least 30 days before the next election.
- * I am not on parole, probation or serving sentence due to a conviction for an indictable offense under any federal or state laws.
- * I understand that any false or fraudulent registration may subject me to a fine up to \$15,000, imprisonment up to 5 years or both pursuant to R.S. 19:34-1. *EX-11311*

Do you wish to declare a political party affiliation? (Optional)

() Yes, the party name is : _____ () No, I do not wish to be affiliated with any political party.

M2516 54571 03922 03-20-1992
MICKAEL J MENDONCA
13-14 FAIRHAVEN PL
FAIR LAWN NJ 07410-1627 B

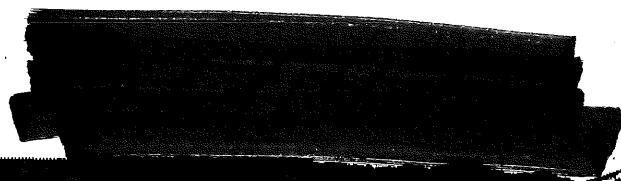
Motor Vehicle NEW JERSEY

152654890



MICKAEL J MENDONCA
13-14 FAIRHAVEN PL
FAIR LAWN NJ 07410

RP WL201321900000074



13-14 Fairhaven Place
Fair Lawn, NJ 07410
October 2, 2013

Dear: Super attendant of Elections

My name is Mickael Mendonca I received a letter thanking me for my decision to register to vote. I am not a US Citizen. I have a green card. I will become a citizen in a few years. I don't think I could vote.

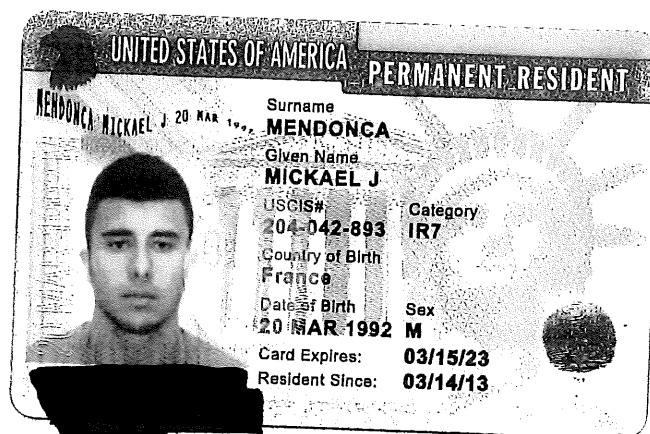
Please take care of this matter. I have included a copy of my green card with this letter. If you need to reach me my phone is 201-796-0023.
Thank you.

Sincerely

Mickael Mendonca



2013 OCT 7 PM 9 00
OFFICE OF THE
CLERK OF THE
SUPERIOR COURT

[illegible]



BERGEN COUNTY
SUPERINTENDENT OF ELECTIONS
ONE BERGEN COUNTY PLAZA, ROOM 380
HACKENSACK, N. J. 07601
PHONE: (201) 336-6100
FAX: (201) 336-6111

PATRICIA DI COSTANZO
SUPERINTENDENT OF ELECTIONS
COMMISSIONER OF REGISTRATION

THERESA M. O'CONNOR
DEPUTY SUPERINTENDENT OF ELECTIONS
DEPUTY COMMISSIONER OF REGISTRATION

October 15, 2013

Mickael J. Mendonca
13-14 Fairhaven Place
Fair Lawn, NJ 07410

DOB: March 20, 1992

Mickael J. Mendonca registered to vote on August 7, 2013.

Mr. Mendonca has never voted and was removed when he informed us that he was not a citizen at the time he was asked to register to vote at Motor Vehicle.

A certified copy of his voter profile, showing he was removed from the rolls, per his request, is enclosed.

If you have any questions, please do not hesitate to call this office.

Sincerely,

A handwritten signature in black ink, appearing to read "Theresa M. O'Connor".

Theresa M. O'Connor
Deputy Superintendent of Elections



BERGEN COUNTY

OFFICE OF THE COUNTY EXECUTIVE

One Bergen County Plaza, Room 580, Hackensack, NJ 07601-7076
(201) 336-7300 380 Fax: (201) 336-7304
www.co.bergen.nj.us

Kathleen A. Donovan
Bergen County Executive

*System oriented system oriented of election
planned of election*

[Signature]

September 27, 2013

Mickael Mendonca
13-14 Fairhaven Place
Fair Lawn, NJ 07410

Dear Voter,

I want to thank you for your decision to register to vote. Your action demonstrates that you are a citizen who takes our voting responsibility seriously. The right to vote is a unique, cherished privilege that all Americans should hold dear and never take for granted. Voting not only allows us to participate in the election of our local, county, state and federal representatives, it also allows us to effectively and actively participate in the policies created by the government officials we elect. Voting allows us to hold our officials accountable for their actions, and it makes us all a part of the decision-making process that gives America direction and preserves our values.

By registering to vote, you have taken a tremendous step in preserving your right to vote; a right that millions of people around the world are denied. I urge you to exercise your voting privilege in a diligent and responsible manner; stay informed on issues, ask questions and voice your concerns about government policies that are important to you and your family.

Please do not hesitate to contact my office about any issues concerning county government or the voting process.

Very truly yours,

Kathleen A. Donovan

Kathleen A. Donovan
Bergen County Executive

KAD/lis

John
Jalan

Not US citizen/only has green card
Read K. Donnan the

Voter Profile

User Printed: BESDHEN
Date: 10/02/2013

201-796-0023

Voter Information:

Voter's Name: MICKAEL J MENDONCA
Date of Birth: 03/20/1992
Voter ID: 152654890
Legacy ID:
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit:
Suffix A:
Suffix B:
Street Number: 13-14
Street Name: FAIRHAVEN PL
Address Line 2:
Address Line 3:
Municipality : FAIR LAWN
Postal City: FAIR LAWN
State: NJ
Zip: 07410

Party Information:

Current Party: Unaffiliated
Party Privilege Date: 08/28/2013

Miscellaneous:

Gender: Not Entered
Absentee Ballot Type: None
Registration Date: 08/07/2013
Registration Type: Agency with Identification
Last Action Taken Date: 08/26/2013

Status Information:

Voting Privilege Date: 08/28/2013
Current Status: Active
Date Last Voted:
Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Districts:

| | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|-----------------------|
| Ward | 00 | District | 17 | Congressional | 05 | Legislative 38 |
| Freeholder | | School | | Special | | Fire |

Previous Residence Addresses:

No Records Found for the Previous Residence Addresses

Election History:

No Records Found for the Election History

Previous Party:

No Records Found for the Previous Party

Previous Name:

No Records Found for the Previous Name

Registration History:

No Records Found for the Registration History

152654890



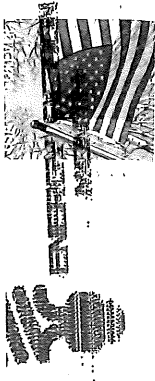
MICKAEL J MENDONCA
13 -14 FAIRHAVEN PL
FAIR LAWN NJ 07410

Friday 12/2/13

By: SCE Fri 10/4/13 12:00pm
10/10/13

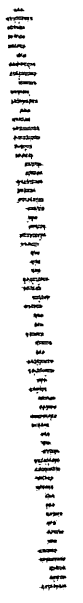
MICHAEL MENDONÇA
3-14 FAIRHAVEN PL
FAIRHAVEN, NJ 07410

NRJ METRO NJ076
04 OCT 2013 PM 5 L



BERGEN COUNTY
SUPERINTENDENT OF ELECTIONS
ONE BERGEN COUNTY PLAZA ROOM 380
~~NEW~~ HACKENSACK, NJ 07601-7076

0760187076



Voter Profile

User Printed: BESPTOGU
Date: 03/30/2017

Voter Information:

Voter's Name: NICOLAS MILLAN
Date of Birth: 09/28/1983
Voter ID: 119702892
Legacy ID: J905740
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit:
Suffix A:
Suffix B:
Street Number: 451
Street Name: 8TH ST
Address Line 2:
Address Line 3:
Municipality : PALISADES PARK
Postal City: PALISADES PARK
State: NJ
Zip: 07650

Party Information:

Current Party: Unaffiliated
Party Privilege Date:

Miscellaneous:

Gender: Not Entered
Absentee Ballot Type: None
Registration Date: 09/11/2002
Registration Type: Mail-in without Identification
Last Action Taken Date:

Status Information:

Voting Privilege Date:
Current Status: Rejected
Date Last Voted: 11/02/2004
Rejected Reason: Not a U.S Citizen/Checked off No to U.S. Citizenship
Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Districts:

| | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|-----------------------|
| Ward | 00 | District | 08 | Congressional | 09 | Legislative 37 |
| Freeholder | | School | | Special | | Fire |

Previous Residence Addresses:

No Records Found for the Previous Residence Addresses

Election History:

| Election Date & Name | Election Type | Election Code | Ballot Type | County Voted In | Municipality Voted In | Party Affiliation | Memo | User Scanned | Date Scanned | Date Counted | Ballot Status |
|-----------------------------------|---------------|---------------|-------------|-----------------|-----------------------|-------------------|------|--------------|--------------|--------------|---------------|
| 11/02/2004- GENERAL 11/02/2004 | General | 00040 | Machine | BERGEN | UNKNOWN | | | CONV | 01/01/2004 | 11/02/2004 | |

Previous Party:

No Records Found for the Previous Party

Previous Name:

No Records Found for the Previous Name

Registration History:

Permanent Registration
(ORIGINAL)

J 905740

CHANGE IN /



State of New Jersey
County Commissioners of Registration

76

Voter Registration Application

Check one:



New Registration



Address Change



Name Change

Last Name

First Name

Middle Initial Jr. Sr.

Millan

Nicholas

M

II III

Street Address Where You Live

451 8th Street

6492-01

Apt. #

D-8

City or Town

Palisades Park

County

BERGEN

Zip Code

07650

Address Where You Get Your Mail (if different from above)

Date of Birth - Month, Day, Year

9/28/83

7

Telephone Number (optional)

Name And Address Of Your Last Voter Registration

Declaration - I swear or affirm that:

- I am a U.S. citizen
- I live at the above address
- I will be at least 18 years old on or before the next election
- I am not on parole, probation or serving sentence due to a conviction for an indictable offense under any federal or state laws.
- I understand that any false or fraudulent registration may subject me to a fine up to \$1,000, imprisonment up to 5 years or both pursuant to R.S. 19:34-1.

County

For Office Use Only

N.R

Clerk

9/11/02 LP

Registration No.

Office Time Stamp

SEP 11 11 42 AM '02
SUPERINTENDENT
OF ELECTIONS
BERGEN COUNTY, NJ

119702892



NICOLAS MILLAN
451 8TH ST
PALISADES PARK NJ 07650

20-0016/01-2
L 10/10/02 Q0

August 15, 2012

RE: Nicolas Millan
451 8th Street
Palisades Park NJ 07650

DOB: September 28, 1983

Nicolas Millan registered to vote September 11, 2002

Nilolas Millan voted in the General Election on November 2, 2004.

A certified copy of his voter profile, showing he was removed from the rolls, per his request, is enclosed.

If you have any questions, please do not hesitate to call this office.

Sincerely,

Patricia DiCostanzo
Superintendent of Elections

119702892



NICOLAS MILLAN
451 8TH ST
PALISADES PARK NJ 07650

119702892



NICOLAS MILLAN
451 8TH ST
PALISADES PARK NJ 07650

Nicolas Millan

901 - 282 - 1933

Copy Voting Card

Voting Records

+ Letter

NOT A CITIZEN

Lawyer Needs Documentation
+ Letter Saying We
Took him off The Voting
Records

When he was in College
STAFF SAID IT WOULD
BE OK TO REGISTERED
EVEN IF HE'S NOT A
CITIZEN

Voter Profile

User Printed: BESOEAD2
Date: 03/29/2017

Voter Information:

Voter's Name: YUI NAKAGAWA
Date of Birth: 09/24/1991
Voter ID: 151213094
Legacy ID:
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit:
Suffix A:
Suffix B:
Street Number: 109
Street Name: HOMEWOOD AVE
Address Line 2:
Address Line 3:
Municipality : ALLENDALE
Postal City: ALLENDALE
State: NJ
Zip: 07401

Party Information:

Current Party: Unaffiliated
Party Privilege Date: 09/23/2009

Miscellaneous:

Gender: Not Entered
Absentee Ballot Type: None
Registration Date: 09/02/2009
Registration Type: Mail-in without Identification
Last Action Taken Date: 10/16/2012

Status Information:

Voting Privilege Date: 09/23/2009
Current Status: Deleted
Date Last Voted:
Deleted Date: 10/16/2012
Deleted Reason: Administrative Action
Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Districts:

| | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|-----------------------|
| Ward | 00 | District | 02 | Congressional | 05 | Legislative 40 |
| Freeholder | | School | | Special | | Fire |

Previous Residence Addresses:

No Records Found for the Previous Residence Addresses

Election History:

No Records Found for the Election History

Previous Party:

No Records Found for the Previous Party

Previous Name:

No Records Found for the Previous Name

Registration History:

No Records Found for the Registration History

Miscellaneous Memo

**BESOEAD2 /
BERGEN**

Memo :

NOT A U S CITIZEN

Close

151213094




YUI NAKAGAWA
109 HOMEWOOD AVE
ALLENDALE NJ 07401



New Jersey Voter Registration Application

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

| | | | | | | |
|---|------------|---|---|--|------------------------------|--|
| 1 Check boxes that apply: | | <input checked="" type="checkbox"/> New Registration | <input type="checkbox"/> Address Change | <input type="checkbox"/> Political Party Affiliation or Non-affiliation Change | FOR OFFICIAL USE ONLY | |
| | | <input type="checkbox"/> Name Change | <input type="checkbox"/> Signature Update | | | |
| 2 Are you a U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No (If No, DO NOT complete this form) | | Will you be 18 years of age by the next election? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If No, DO NOT complete this form) | | | Clerk: E9-209 | |
| 3 Last Name | First Name | Middle Name or Initial | Suffix (Jr., Sr., III) | Registration # RT | | |
| 4 Date of Birth | | Office Time Stamp | | | | |
| Month 09 Day 24 Year 1991 | | | | | | |
| 5 NJ Driver's License Number or MVC Non-driver ID Number | | If you DO NOT have a NJ Driver's License or MVC Non-Driver ID, provide the last 4 digits of your Social Security Number. | | | | |
| | | | | | | |
| <input type="checkbox"/> I swear or affirm that I DO NOT have a NJ Driver's License, MVC Non-driver ID or a Social Security Number. | | | | | | |
| 6 Home Address (DO NOT use PO Box) | Apt. | Municipality | County | State | Zip Code | |
| 109 Homewood Ave. | | Alendale | Bergen | NJ | 07401 | |
| 7 Mailing Address if different from above | Apt. | Municipality | County | State | Zip Code | |
| | | | | | | |
| 8 Last Address Registered to Vote (DO NOT use PO Box) | Apt. | Municipality | County | State | Zip Code | |
| | | | | | | |
| 9 Former Name if Making Name Change | | | Day Phone Number (Optional) 201 934 9251 | | | |
| | | | | | | |
| 10 Do you wish to declare a political party affiliation? (Optional) | | | <input type="checkbox"/> Yes, the party name is _____ <input checked="" type="checkbox"/> No, I do not wish to be affiliated with any political party. | | | |
| 11 Gender | | | Declaration - I swear or affirm that: | | | |
| <input checked="" type="checkbox"/> Female <input type="checkbox"/> Male | | | <input type="checkbox"/> I am a U.S. Citizen. <input type="checkbox"/> I live at the above address. <input type="checkbox"/> I will be at least 18 years old on or before the next election. <input type="checkbox"/> I will have resided in the State and county at least 30 days before the next election. <input type="checkbox"/> I am not on parole, probation or serving a sentence due to a conviction for an indictable offense under any federal or state laws. <input type="checkbox"/> I understand that any false or fraudulent registration may subject me to a fine of up to \$15,000, imprisonment up to 5 years, or both pursuant to R.S. 19-34. | | | |
| Signature: Sign or mark and date on lines below | | | If applicant is unable to complete this form, print the name and address of individual who completed this form. | | | |
|  Date: 10/21/09 | | | Name: _____ Address: _____ Date: 10/21/09 | | | |

Important Instructions for sections 5, 6 and 10

- Registrants who are submitting this form for the first time and are registering to vote for the first time. If you do not have any of the information required by section 5, or the information you provide is incorrect, you will be asked to provide a COPY of a current and valid photo ID, or a document with your name and current address at a local polling place to provide identification at the polling place.
Note: ID Numbers are confidential and will not be released to any governmental agency. Any person who uses such numbers illegally may be subject to criminal penalties.
- If you are homeless, you may complete section 5 by providing a contact point or the location where you spend most of your time.
- You may declare a political affiliation or you may declare to be unaffiliated, regardless of any prior party affiliation. Completing section 10 is OPTIONAL and will not affect the acceptance of your voter registration application. A voter can affiliate with one of the following parties: Democratic, Republican, Green, Libertarian, Natural Law, Reform, or United States Constitution.



Not USP

BERGEN COUNTY
SUPERINTENDENT OF ELECTIONS
ONE BERGEN COUNTY PLAZA, ROOM 380
HACKENSACK, N. J. 07601
PHONE: (201) 336-6100
FAX: (201) 336-6111

PATRICIA DI COSTANZO
SUPERINTENDENT OF ELECTIONS
COMMISSIONER OF REGISTRATION

151213094



YUI NAKAGAWA
109 HOMEWOOD AVE
ALLENDALE NJ 07401

THERESA M. O'CONNOR
DEPUTY SUPERINTENDENT OF ELECTIONS
DEPUTY COMMISSIONER OF REGISTRATION

Dear Registrant:

Our office received your Voter Registration application and the following was not completed:

*Date of Birth ~~01-27-1967~~ ^{YN} 9-24-1991

*You did not check if you are a US Citizen

Please mark with an X () I am a US Citizen

(X) I am NOT a US Citizen

*You did not sign your application.

Signature

Yui Nakagawa

Print

Please return in the enclosed envelope by October 18, 2012.

Sincerely,

Patricia DiCostanzo
Patricia DiCostanzo
Superintendent of Elections

Incomplete
Reg date
9/02/09

2012 OCT 15 AM 11 28
SUPERINTENDENT
OF ELECTIONS
BERGEN COUNTY, N.J.

Voter Profile

User Printed: BESPTOGU
Date: 03/30/2017

Voter Information:

Voter's Name: SIMON B NAULA
Date of Birth: 06/01/1970
Voter ID: 524590142
Legacy ID:
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit: B6
Suffix A:
Suffix B:
Street Number: 85
Street Name: ANDERSON ST
Address Line 2:
Address Line 3:
Municipality : HACKENSACK
Postal City: HACKENSACK
State: NJ
Zip: 07601

Party Information:

Current Party: Unaffiliated
Party Privilege Date:

Miscellaneous:

Gender: Not Entered
Absentee Ballot Type: None
Registration Date: 01/07/2015
Registration Type: Agency with Identification
Last Action Taken Date: 11/03/2015

Status Information:

Voting Privilege Date:
Current Status: Rejected
Date Last Voted:
Rejected Reason: Not a U.S Citizen/Checked off No to U.S. Citizenship
Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Districts:

| | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|-----------------------|
| Ward | 05 | District | 01 | Congressional | 05 | Legislative 37 |
| Freeholder | | School | | Special | | Fire |

Previous Residence Addresses:

| Change Date | Street Number | Street Name | Address Line 2 | Address Line 3 | Unit | Municipality | State | Zip Code |
|-------------|---------------|----------------|----------------|----------------|------|--------------|------------|----------|
| 11/03/2015 | | 750 CEDAR LANE | | | | TEANECK | New Jersey | 07666 |

Election History:

No Records Found for the Election History

Previous Party:

No Records Found for the Previous Party

Previous Name:

No Records Found for the Previous Name

Registration History:

No Records Found for the Registration History

Main Menu:

Activities

Voter Registration

Add/Change Voter

Voter With No DOB

Voter Address Change

Confirmation

Voter Address Change

Confirmation Export

MVC - Agency

MVC File Online Voter

Voters who have

Verification / Postal Notice

Verif. and Ack. Card Export

MVC Manual Update

Maintain Voter History

Maintain County Data

Elections

System

Poll Book Printing Schedule

Duplicate Voters

Batch Scanning

Messaging

MVC DL Search

Backend Reporting

Document Imaging

Handheld Scanning

Inquiries

Reports

Help

Logout

Compare MVC - Agency

BESOEAD2 / B

MVC Voter

| | | | |
|-------------------------|---|----------------------------------|---|
| Name | SIMON B NAULA | Date of Birth | 06/01/1970 |
| Residence Address | 85 ANDERSON ST APT B6 HACKENSACK NJ 07601-4427 | Mailing Address | |
| Driver's License Number | N08807166206702 | Original Driver's License Number | N08807166206702 |
| Card Number | | Previous DOB | 06/01/1970 |
| Previous Name | SIMON B NAULA | Previous Address | 750 CEDAR LANE TEANECK NJ 07666-1705 |
| MVC Transaction Date | 01/07/2015 | | |

MVC Signature Date: 01/07/2015

Reject ☐ English:☒ Spanish:

Reject

No Card Issued

SVRS Matched Voters

| Select | Voter Id | Name | Date of Birth | Registration Date | Residence Address | Mailing Address | Driver's License Number | SSN | Confidence Factor | Status |
|---|----------|------|---------------|-------------------|-------------------|-----------------|-------------------------|-----|-------------------|--------|
| No Matching records Found. You can either choose to take No Action, Add or Reject this Motor Voter by clicking on the re buttons. | | | | | | | | | | |

* under Status Reason Indicates voter has multiple status reasons.

Note:

If status is blank, that implies the voter status is Active.

If Confidence Factor is 100 %, that implies Driver's License Num

If Confidence Factor is 50 %, that implies Last Name, First Nam

Last Name, First Name, First Letter of Middle Name and DOB (01

If Confidence Factor is 25 %, that implies Soundex of Last Nam

Name matching process Includes MVC previous names if there is

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524590142

SIMON B NAULA
85 ANDERSON ST Apt-Unit B6
HACKENSACK NJ 07601

12-21-15

I, Simon B. Naula declare
that I am not a Citizen
of the United States.

I would like to be a
Citizen of the United States
but Circumstances don't
allow.

X

524590142



SIMON B NAULA
85 ANDERSON ST Apt-Unit B6
HACKENSACK NJ 07601

2015 DEC 21 PM 12:40

SUPERINTENDENT
OF ELECTIONS
BERGEN COUNTY, N.J.

Voter Profile

User Printed: BESOEAD2

Date: 03/29/2017

Voter Information:

Voter's Name: YOEMILA NOVO
Date of Birth: 12/18/1989
Voter ID: 151297882
Legacy ID:
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit: 2
Suffix A:
Suffix B:
Street Number: 53
Street Name: CEDAR ST
Address Line 2:
Address Line 3:
Municipality : RIDGEFIELD PARK
Postal City: RIDGEFIELD PARK
State: NJ
Zip: 07660

Party Information:

Current Party: Unaffiliated
Party Privilege Date: 03/10/2010

Miscellaneous:

Gender: Not Entered
Absentee Ballot Type: None
Registration Date: 02/17/2010
Registration Type: Mail-in without Identification
Last Action Taken Date: 12/12/2012

Status Information:

Voting Privilege Date: 03/10/2010
Current Status: Deleted
Date Last Voted:
Deleted Date: 12/12/2012
Deleted Reason: Administrative Action
Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Districts:

| | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|-----------------------|
| Ward | 00 | District | 03 | Congressional | 09 | Legislative 36 |
| Freeholder | | School | | Special | | Fire |

Previous Residence Addresses:

No Records Found for the Previous Residence Addresses

Election History:

No Records Found for the Election History

Previous Party:

No Records Found for the Previous Party

Previous Name:

No Records Found for the Previous Name

Registration History:

No Records Found for the Registration History

Miscellaneous Memo

**BESOEAD2 /
BERGEN**

Memo :

NOT A U S CITIZEN

Close

NLS

Sent VR P. to Leg

New Str/VR

12/17/10



Citizen

TOP - FORM SIDE

New Jersey Voter Registration Application

Print clearly in black or blue ink using a ball point pen or marker

76

1 Check boxes that apply I am a U.S. citizen ☒ Yes ☐ No* I will be 18 years of age by the next election ☐ Yes ☐ No* **STOP** *If you check "No" in either box DO NOT COMPLETE THIS FORM

2 Check boxes that apply ☐ New Registration (If you are registering for the first time in the county in which you live) ☐ Address Change (If you are currently registered and have moved within your county) ☐ Name Change (If you are currently registered in the county in which you live) NO TO REG

3 Last Name First Name Middle Initial Suffix
NOVO YEMILA

4 Street Address (where you live) Apartment #
53 Cedar St. 7586-01 2
Municipality (town/city) County Zip Code
Ridgefield Park Berge. D-3

5 Complete only if different from address above Address (where you get your mail) Apartment #
Municipality (town/city) County Zip Code

6 Date of Birth Month Day Year Telephone Number (optional) Area Code
1 12 1 8 1 9 8 9 2 0 1 4 4 0 3 1 1 0 2

8 Name at address used for your last voter registration if applicable 151297882 Middle Initial Suffix
YOEMILA NOVO
53 CEDAR ST Apt-Unit 2
RIDGEFIELD PARK NJ 07660
Apartment #
State Zip Code

9 Give one ID # by the last four numbers of your Social Security #

10 Declaration
I swear or affirm that:
• I am a U.S. citizen.
• I will be at least 18 years old on or before the next election.
• I reside at the address shown above.
• I am not on parole, probation, or serving a sentence in a prison or jail.
• I understand that any false or fraudulent registration may subject me to a fine up to \$1,000, imprisonment up to 5 years, or both pursuant to R.S. 19:34-1.
Signature / Mark Date
If applicant is unable to complete this form, print name and address of individual who completed this form
Name
Address
Municipality (town/city) State Zip Code
FOR OFFICE USE ONLY
Clerk
Registration #
Office Time Stamp
by mail

Not US citizen Incomplete
Sent 1/2 & ltr. citizen (no ans.)
Sent 12/17/10



PATRICIA DI COSTANZO
SUPERINTENDENT OF ELECTIONS
COMMISSIONER OF REGISTRATION

151297882



YOEMILIA NOVO
53 CEDAR ST Apt Unit 2
RIDGEFIELD PARK NJ 07660

BERGEN COUNTY
SUPERINTENDENT OF ELECTIONS
ONE BERGEN COUNTY PLAZA, ROOM 380
HACKENSACK, N. J. 07601
PHONE: (201) 336-6100
FAX: (201) 336-6111

THERESA M. O'CONNOR
DEPUTY SUPERINTENDENT OF ELECTIONS
DEPUTY COMMISSIONER OF REGISTRATION

12/12/12
[Signature]

Dear Registrant:

Our office received your Voter Registration application and the following was not completed:

*Date of Birth 12-18-2012

*You did not check if you are a US Citizen

Please mark with an X () I am a US Citizen
 (X) I am NOT a US Citizen

*You did not sign your application.

[Redacted Signature]

Signature

Yoemilia Novo

Print

Please return in the enclosed envelope by October 18, 2012.

Sincerely,

Patricia DiCostanzo
Patricia DiCostanzo
Superintendent of Elections

SUPERINTENDENT
OF ELECTIONS
BERGEN COUNTY, N.J.
2012 DEC 10 AM 11 14

Voter Profile

User Printed: BESPTOGU

Date: 03/30/2017

Voter Information:

Voter's Name: GASPAR OTERO

Date of Birth: 01/06/1968

Voter ID: 152165597

Legacy ID:

Archived Legacy ID:

Residence Address:

County: BERGEN

Unit: 4

Suffix A:

Suffix B:

Street Number: 181

Street

Name: WESTMINSTER PL

Address Line 2:

Address Line 3:

Municipality : LODI

Postal City: LODI

State: NJ

Zip: 07644

Party Information:

Current Party: Democratic*

Party Privilege Date:

Miscellaneous:

Gender: Male

Absentee Ballot Type: None

Registration Date: 01/12/2012

Registration Type: Mail-in with
Identification

Last Action Taken Date: 01/19/2012

Status Information:

Voting Privilege Date:

Current Status: Rejected

Date Last Voted:

Rejected Reason: Not a U.S Citizen/Checked off No to
U.S. Citizenship

Poll Worker Status:

Mailing Address:

Street Number:

Suffix A:

Suffix B:

Street Name/P.O. Box:

Unit:

Address Line 2:

Address Line 3:

City:

State:

Zip Code:

Country:

Inactive Confirmation Address:

Street Number:

Suffix A:

Suffix B:

Street Name/P.O. Box:

Unit:

Address Line 2:

Address Line 3:

City:

State:

Zip Code:

Country:

Districts:

| | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|-----------------------|
| Ward | 00 | District | 03 | Congressional | 05 | Legislative 38 |
| Freeholder | | School | | Special | | Fire |

Previous Residence Addresses:

No Records Found for the Previous Residence Addresses

Election History:

No Records Found for the Election History

Previous Party:

No Records Found for the Previous Party

Previous Name:

No Records Found for the Previous Name

Registration History:

No Records Found for the Registration History



New Jersey Voter Registration Application

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

Bergen 76

| | | | | | | |
|---|---|---|---|--------------------|------------------------|---|
| 1 Check boxes that apply: <input type="checkbox"/> New Registration <input type="checkbox"/> Address Change <input type="checkbox"/> Political Party Affiliation or Non-affiliation Change <input checked="" type="checkbox"/> Name Change <input type="checkbox"/> Signature Update | | | | | | FOR OFFICIAL USE ONLY Clerk: <u>12-12-11</u> Registration #: <u>NP</u> Office Time Stamp: <u>2012 MAR 11 1:34 PM</u> SUPERINTENDENT OF ELECTORAL ADMINISTRATION BERGEN COUNTY, NJ |
| 2 Are you a U.S. Citizen? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If No, DO NOT complete this form) | | Will you be 18 years of age by the next election? <input type="checkbox"/> Yes <input type="checkbox"/> No (If No, DO NOT complete this form) | | | | |
| 3 Last Name: <u>OTERO</u> | First Name: <u>GASPAR</u> | Middle Name or Initial: | Suffix (Jr., Sr., III): | | | |
| 4 Date of Birth: <u>01-06-68</u> | | | | | | |
| 5 NJ Driver's License Number or MVC Non-driver ID Number: <u>082302750001682</u> If you DO NOT have a NJ Driver's License or MVC Non-Driver ID, provide the last 4 digits of your Social Security Number. | | | | | | |
| <input type="checkbox"/> "I swear or affirm that I DO NOT have a NJ Driver's License, MVC Non-driver ID or a Social Security Number." | | | | | | |
| 6 Home Address (DO NOT use PO Box): <u>181 WESTMINSTER PL.</u> | Apt.: <u>4</u> | Municipality: <u>LODI</u> | County: <u>USA</u> | State: <u>N.J.</u> | Zip Code: <u>07644</u> | |
| 7 Mailing Address if different from above: | Apt.: | Municipality: | County: | State: | Zip Code: | |
| 8 Last Address Registered to Vote (DO NOT use PO Box): | Apt.: | Municipality: | County: | State: | Zip Code: | |
| 9 Former Name if Making Name Change: | | a. Day Phone Number (Optional): b. E-Mail Address (Optional): | | | | |
| 10 Do you wish to declare a political party affiliation? <input type="checkbox"/> Yes, the party name is <u>Democrat</u> (Optional) <input type="checkbox"/> No, I do not wish to be affiliated with any political party. | | | | | | |
| 11 Gender: <input type="checkbox"/> Female <input checked="" type="checkbox"/> Male | Declaration - I swear or affirm that: <input checked="" type="checkbox"/> I am a U.S. Citizen <input checked="" type="checkbox"/> I live at the above address <input checked="" type="checkbox"/> I will be at least 18 years old on or before the next election <input type="checkbox"/> I will have resided in the State and county at least 30 days before the next election <input type="checkbox"/> I am not on parole, probation or serving a sentence due to a conviction for an indictable offense under any federal or state laws <input type="checkbox"/> I understand that any false or fraudulent registration may subject me to a fine of up to \$15,000, imprisonment up to 5 years, or both pursuant to R.S. 19:34-1 | | | | | |
| Signature: Sign or mark and date on lines below <u>[Signature]</u> | | | If applicant is unable to complete this form, print the name and address of individual who completed this form. Name: _____ Date: _____ Address: _____ | | | |

Important Instructions for sections 5, 6 and 10

- 5) Registrants who are submitting this form by mail and are registering to vote for the first time: If you do not have any of the information, you will be asked to provide a COPY of a current address on it to avoid having to provide identification at the time of registration.



GASPAR OTERO
181 WESTMINSTER PL Apt-Unit 4
LODI NJ 07644

used by any governmental agency. Any person who uses such aliases, including a contact point or the location where you spend most of your time.

Registrants who are submitting this form by mail and are registering to vote for the first time: If you do not have any of the information, you will be asked to provide a COPY of a current address on it to avoid having to provide identification at the time of registration.

Need More Information? Check boxes below if you would like to receive more information about:

- | | | |
|---|---|---|
| <input type="checkbox"/> voting by mail | <input type="checkbox"/> polling place accessibility | <input type="checkbox"/> available election materials in this alternative language: |
| <input type="checkbox"/> becoming a poll worker | <input type="checkbox"/> voting if you have a disability, including visual impairment | <u>US citizen</u> |


For further information visit www.NJElections.org or call toll-free 1-877-NJVOTER (1-877-658-6837)



New Jersey Voter Registration Application

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

DATE: MAR 20 76

| | | | | | | | | | |
|--|--|---|---|-------------------------|--|--|-----------------|-----------------------------|--|
| 1 Check boxes that apply: <input type="checkbox"/> New Registration <input type="checkbox"/> Address Change <input type="checkbox"/> Political Party Affiliation or Non-affiliation Change <input type="checkbox"/> Name Change <input type="checkbox"/> Signature Update | | | | | | FOR OFFICIAL USE ONLY Clerk: 1-12-12 Registration #: 152165597 Office Time Stamp: | | | |
| 2 Are you a U.S. Citizen? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If No, DO NOT complete this form) | | | Will you be 18 years of age by the next election? <input type="checkbox"/> Yes <input type="checkbox"/> No (If No, DO NOT complete this form) | | | | | | |
| 3 Last Name: OTERO | | First Name: GASPAR | | Middle Name or Initial: | | | | Suffix (ex. Jr., Sr., III): | |
| 4 Date of Birth: Month [] Day [] Year [] [] [] | | | | | | | | | |
| 5 NJ Driver's License Number or MVC Non-driver ID Number: [] [] [] [] [] [] [] [] [] [] | | | | | | If you DO NOT have a NJ Driver's License or MVC Non-Driver ID, provide the last 4 digits of your Social Security Number: [] [] [] [] | | | |
| <input type="checkbox"/> "I swear or affirm that I DO NOT have a NJ Driver's License, MVC Non-driver ID or a Social Security Number." | | | | | | | | | |
| 6 Home Address (DO NOT use PO Box): 181 Westminister | | | Apt./: 4 | Municipality: Lodi | County: NJ | State: | Zip Code: 07644 | | |
| 7 Mailing Address if different from above: | | | Apt.: | Municipality: | County: | State: | Zip Code: | | |
| 8 Last Address Registered to Vote (DO NOT use PO Box): | | | Apt.: | Municipality: | County: | State: | Zip Code: | | |
| 9 Former Name if Making Name Change: | | | | | Day Phone Number (Optional): | | | | |
| 10 Do you wish to declare a political party affiliation? <input type="checkbox"/> Yes, the party name is _____ <input checked="" type="checkbox"/> No, I do not wish to be affiliated with any political party. (Optional) | | | | | | | | | |
| 11 Gender: <input type="checkbox"/> Female <input checked="" type="checkbox"/> Male | | Declaration - I swear or affirm that: <ul style="list-style-type: none"> ● I am a U.S. Citizen ● I live at the above address ● I will be at least 18 years old on or before the next election | | | | | | | |
| | | <ul style="list-style-type: none"> ● I will have resided in the State and county at least 30 days before the next election ● I am not on parole, probation or serving a sentence due to a conviction for an indictable offense under any federal or state laws ● I understand that any false or fraudulent registration may subject me to a fine of up to \$15,000, imprisonment up to 5 years, or both pursuant to R.S. 19:34-1 | | | | | | | |
| Signature: Sign or mark and date on line below  Date: 1-15-12 | | | | | If applicant is unable to complete this form, print the name and address of individual who completed this form. Name: _____ Date: _____ Address: _____ | | | | |

152165597



GASPAR OTERO
181 WESTMINSTER PL Apt-Unit 4
LODI NJ 07644

is 5, 6 and 10

re registering to vote for the first time: If you do not have any of the provide cannot be verified, you will be asked to provide a COPY of a current and address on it to avoid having to provide identification at the polling place.

ased by any governmental agency. Any person who uses such numbers

viding a contact point or the location where you spend most of your time.

a to be unaffiliated, regardless of any prior party affiliation. Completing

section 10 is Optional and will not affect the acceptance of your voter registration application.

Need More Information? Check boxes below if you would like to receive more information about:

- ☐ voting by mail
☐ becoming a poll worker

- ☐ polling place accessibility
☐ voting if you have a disability including visual impairment

- ☐ available election materials in this alternative language

For further information visit www.NJElections.org or call toll-free 1-877-NJVOTER (1-877-658-6887)

Voter Profile

User Printed: BESOEAD2
Date: 03/29/2017

Voter Information:

Voter's Name: VARDAN OVSEPIAN
Date of Birth: 02/21/1959
Voter ID: 152157000
Legacy ID:
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit: 1B
Suffix A:
Suffix B:
Street Number: 115
Street Name: E CLINTON AVE
Address Line 2:
Address Line 3:
Municipality : BERGENFIELD
Postal City: BERGENFIELD
State: NJ
Zip: 07621

Party Information:

Current Party: Unaffiliated
Party Privilege Date:

Miscellaneous:

Gender: Not Entered
Absentee Ballot Type: None
Registration Date: 11/22/2011
Registration Type: Mail-in with Identification
Last Action Taken Date: 01/03/2012

Status Information:

Voting Privilege Date:
Current Status: Rejected
Date Last Voted:
Rejected Reason: Not a U.S Citizen/Checked off No to U.S. Citizenship
Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Districts:

| | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|-----------------------|
| Ward | 00 | District | 05 | Congressional | 05 | Legislative 38 |
| Freeholder | | School | | Special | | Fire |

Previous Residence Addresses:

No Records Found for the Previous Residence Addresses

Election History:

No Records Found for the Election History

Previous Party:

No Records Found for the Previous Party

Previous Name:

No Records Found for the Previous Name

Registration History:

No Records Found for the Registration History



nidoa-ty-2/2/11



OFFICE OF BERGEN COUNTY
Superintendent of Elections

ONE BERGEN COUNTY PLAZA, ROOM 380
HACKENSACK, N.J. 07601
OFF: (201) 336-6100 FAX: (201) 336-6111

PATRICIA DI COSTANZO
SUPERINTENDENT OF ELECTIONS AND
COMMISSIONER OF REGISTRATION

THERESA M. O'CONNOR
DEPUTY SUPERINTENDENT OF ELECTIONS
AND DEPUTY COMMISSIONER OF REGISTRATION

Office of the Bergen County Commissioner of Registration
Oficina del Comisionado de Inscripciones del Condado de Bergen

Identification Information for First-time
Registrants as of January 1, 2003 in Bergen County

Información identificatoria para personas inscritas por primera vez a partir del 1 de enero del 2003 en Condado de Bergen

I am not a USA CITIZEN

N.J. Driver's License Number / N.J. Numero de licencia de conducir

OR / O bien

X - X - X - X - X -
LAST FOUR digits of social security number / Los ULTIMOS CUATRO digitos de su número de seguro social

* I DO NOT HAVE EITHER A DRIVER'S LICENSE
OR A SOCIAL SECURITY NUMBER

NO TENGO LICENCIA DE CONDUCIR O NÚMERO
DE SEGURO SOCIAL

152157000



VARDAN OVSEPIAN
115 E CLINTON AVE Apt-Unit 1B
BERGENFIELD NJ 07621

Por favor escriba sus iniciales en esta línea

* If you do not have a driver's license number or a social security number, please provide this office with a copy of a photo ID or a copy of a current utility bill, bank statement, government check, paycheck, or government document that shows your name and address.

* Si no tiene un número de licencia de conducir o número de seguro social, por favor proporcione a esta oficina una copia de un documento identificatorio con fotografía o copia de un cobro reciente de servicios públicos (agua, luz, teléfono), estado de cuentas de un banco, cheque del gobierno, cheque de pago o un documento del gobierno que muestre su nombre y dirección.

2011 DEC 30 A 11:17
SUPERINTENDENT
OF ELECTIONS
BERGEN COUNTY, N.J.

Voter Signature / Firma del elector

Voter Profile

User Printed: BESPTOGU
Date: 03/30/2017

Voter Information:

Voter's Name: CHRISTOPHER PARK
Date of Birth: 07/07/1994
Voter ID: 152271523
Legacy ID:
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit:
Suffix A:
Suffix B:
Street Number: 118
Street Name: HOLIDAY LN
Address Line 2:
Address Line 3:
Municipality : RIVER VALE
Postal City: RIVER VALE
State: NJ
Zip: 07675

Party Information:

Current Party: Unaffiliated
Party Privilege Date:

Miscellaneous:

Gender: Not Entered
Absentee Ballot Type: None
Registration Date: 06/26/2012
Registration Type: Mail-in with Identification
Last Action Taken Date: 06/26/2012

Status Information:

Voting Privilege Date:
Current Status: Rejected
Date Last Voted:
Rejected Reason: Not a U.S Citizen/Checked off No to U.S. Citizenship
Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Districts:

| | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|-----------------------|
| Ward | 00 | District | 02 | Congressional | 05 | Legislative 39 |
| Freeholder | | School | | Special | | Fire |

Previous Residence Addresses:

No Records Found for the Previous Residence Addresses

Election History:

No Records Found for the Election History

Previous Party:

No Records Found for the Previous Party

Previous Name:

No Records Found for the Previous Name

Registration History:

No Records Found for the Registration History



New Jersey Voter Registration Application

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

Suent ID letter

| | | | | | | | |
|---|--|---|--------------------------------|---|------------------------|---|--|
| 1 Check boxes that apply: <input checked="" type="checkbox"/> New Registration <input type="checkbox"/> Address Change <input type="checkbox"/> Political Party Affiliation or Non-affiliation Change <input checked="" type="checkbox"/> Name Change <input type="checkbox"/> Signature Update | | | | | | FOR OFFICIAL USE ONLY Clerk <u>E. L. 26/12</u> Registration # <u>RT</u> Office Time Stamp | |
| 2 Are you a U.S. Citizen? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If No, DO NOT complete this form) Will you be 18 years of age by the next election? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If No, DO NOT complete this form) | | | | | | | |
| 3 Last Name <u>Park</u> | | First Name <u>Christopher</u> | | Middle Name or Initial | Suffix (Jr., Sr., III) | | |
| 4 Date of Birth Month <u>07</u> Day <u>07</u> Year <u>1994</u> | | | | | | | |
| 5 NJ Driver's License Number or MVC Non-driver ID Number _____ If you DO NOT have a NJ Driver's License or MVC Non-Driver ID, provide the last 4 digits of your Social Security Number. _____ <input type="checkbox"/> "I swear or affirm that I DO NOT have a NJ Driver's License, MVC Non-driver ID or a Social Security Number." | | | | | | | |
| 6 Home Address (DO NOT use PO Box) <u>118 Holiday Lane</u> | | Apt. | Municipality <u>River Vale</u> | County <u>Bergen</u> | State <u>NJ</u> | Zip Code <u>07675</u> | |
| 7 Mailing Address if different from above | | Apt. | Municipality | County | State | Zip Code | |
| 8 Last Address Registered to Vote (DO NOT use PO Box) | | Apt. | Municipality | County | State | Zip Code | |
| 9 Former Name if Making Name Change <u>Sung Joan Park</u> | | | | Day Phone Number (Optional) <u>201-815-7557</u> | | | |
| 10 Do you wish to declare a political party affiliation? <input type="checkbox"/> Yes, the party name is _____ <input checked="" type="checkbox"/> No, I do not wish to be affiliated with any political party. (Optional) | | | | | | | |
| 11 Gender <input type="checkbox"/> Female <input checked="" type="checkbox"/> Male | | Declaration - I swear or affirm that: <input checked="" type="checkbox"/> I am a U.S. Citizen <input checked="" type="checkbox"/> I live at the above address <input checked="" type="checkbox"/> I will be at least 18 years old on or before the next election <input type="checkbox"/> I will have resided in the State and county at least 30 days before the next election <input type="checkbox"/> I am not on parole, probation or serving a sentence due to a conviction for an indictable offense under any federal or state laws <input type="checkbox"/> I understand that any false or fraudulent registration may subject me to a fine of up to \$15,000, imprisonment up to 5 years, or both pursuant to R.S. 19:34-1 | | | | | |
| Signature: Sign or mark and date on lines below <u>[Signature]</u> Date <u>10/07/11</u> | | | | If applicant is unable to complete this form, print the name and address of individual who completed this form. Name _____ Date _____ Address _____ | | | |

152271523



CHRISTOPHER PARK
118 HOLIDAY LN
RIVER VALE NJ 07675

5, 6 and 10

registering to vote for the first time: If you do not have any of the IDs cannot be verified, you will be asked to provide a COPY of a current and address on it to avoid having to provide identification at the polling place. used by any governmental agency. Any person who uses such numbers

indicating a contact point or the location where you spend most of your time.

10) You may declare a political affiliation or you may declare to be unaffiliated, regardless of any prior party affiliation. Completing section 10 is OPTIONAL and will not affect the acceptance of your voter registration application. A voter can affiliate with one of the following parties: Democratic, Republican, Green, Libertarian, Natural Law, Reform, or United States Constitution.

Need More Information? Check boxes below if you would like to receive more information about:

- | | | |
|---|--|--|
| <input type="checkbox"/> absentee voting | <input type="checkbox"/> polling place accessibility | <input type="checkbox"/> available election materials in this alternative language |
| <input type="checkbox"/> becoming a poll worker | <input type="checkbox"/> voting if you have a disability including visual impairment | |

For further information visit www.NJElections.org or call toll-free 1-877-NJ-VOTER (1-877-668-6837)



New Jersey Voter Registration Application

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

Sent ID letter

| | | | | | | | |
|--|--|---|--|---|--|--|--|
| 1 Check boxes that apply: <input checked="" type="checkbox"/> New Registration <input type="checkbox"/> Address Change <input type="checkbox"/> Political Party Affiliation or Non-affiliation Change <input checked="" type="checkbox"/> Name Change <input type="checkbox"/> Signature Update | | | | | | FOR OFFICIAL USE ONLY | |
| 2 Are you a U.S. Citizen? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If No, DO NOT complete this form) | | | | Will you be 18 years of age by the next election? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If No, DO NOT complete this form) | | Clerk E6/26/12 | |
| 3 Last Name Park | | First Name Christopher | | Middle Name or Initial | | Suffix (Jr., Sr., III) Registration # RT | |
| 4 Date of Birth Month <u>07</u> Day <u>07</u> Year <u>1994</u> | | | | | | | |
| 5 NJ Driver's License Number or MVC Non-driver ID Number _____ <input type="checkbox"/> I swear or affirm that I DO NOT have a NJ Driver's License, MVC Non-driver ID or a Social Security Number. | | | | If you DO NOT have a NJ Driver's License or MVC Non-Driver ID, provide the last 4 digits of your Social Security Number. | | | |
| 6 Home Address (DO NOT use PO Box) 118 Holiday Lane | | Apt. Municipality River Vale | | County Bergen | | State NJ Zip Code 07675 | |
| 7 Mailing Address if different from above | | Apt. Municipality | | County State Zip Code | | <input type="checkbox"/> by mail <input type="checkbox"/> in person | |
| 8 Last Address Registered to Vote (DO NOT use PO Box) | | Apt. Municipality | | County State Zip Code | | <input type="checkbox"/> by mail <input type="checkbox"/> in person | |
| 9 Former Name if Making Name Change Sung Joon Park | | | | Day Phone Number (Optional) 201-815-7557 | | | |
| 10 Do you wish to declare a political party affiliation? <input type="checkbox"/> Yes, the party name is _____ (Optional) <input checked="" type="checkbox"/> No, I do not wish to be affiliated with any political party. | | | | | | | |
| 11 Gender <input type="checkbox"/> Female <input checked="" type="checkbox"/> Male | | Declaration - I swear or affirm that: <input checked="" type="checkbox"/> I am a U.S. Citizen <input checked="" type="checkbox"/> I live at the above address <input checked="" type="checkbox"/> I will be at least 18 years old on or before the next election <input type="checkbox"/> I will have resided in the State and county at least 30 days before the next election <input type="checkbox"/> I am not on parole, probation or serving a sentence due to a conviction for an indictable offense under any federal or state laws <input type="checkbox"/> I understand that any false or fraudulent registration may subject me to a fine of up to \$15,000, imprisonment up to 5 years, or both pursuant to R.S. 19:34-1 | | | | | |
| Signature: Sign or mark and date on lines below _____ Date <u>10/07/11</u> | | | | If applicant is unable to complete this form, print the name and address of individual who completed this form. Name _____ Date _____ Address _____ | | | |

152271523



CHRISTOPHER PARK
118 HOLIDAY LN
RIVER VALE NJ 07675

5, 6 and 10

registering to vote for the first time: If you do not have any of the ID cannot be verified, you will be asked to provide a COPY of a current and address on it to avoid having to provide identification at the polling place. sed by any governmental agency. Any person who uses such numbers

ding a contact point or the location where you spend most of your time.

10) You may declare a political affiliation or you may declare to be unaffiliated, regardless of any prior party affiliation. Completing section 10 is OPTIONAL and will not affect the acceptance of your voter registration application. A voter can affiliate with one of the following parties: Democratic, Republican, Green, Libertarian, Natural Law, Reform, or United States Constitution.

Need More Information? Check boxes below if you would like to receive more information about:

- | | | |
|---|--|--|
| <input type="checkbox"/> absentee voting | <input type="checkbox"/> polling place accessibility | <input type="checkbox"/> available election materials in this alternative language |
| <input type="checkbox"/> becoming a poll worker | <input type="checkbox"/> voting if you have a disability including visual impairment | |

For further information visit www.NJElections.org or call toll-free 1-877-NJ-VOTER (1-877-658-6837)

njdca-2.8.07

Received a letter verifying ID, called to tell me not a US Citizen. But he checked off Yes.

Voter Profile

User Printed: BESOEAD2
Date: 03/29/2017

Voter Information:

Voter's Name: SOONJA PARK
Date of Birth: **03/07/1943**
Voter ID: 152556036
Legacy ID:
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit:
Suffix A: B
Suffix B:
Street Number: 321
Street Name: 1ST ST
Address Line 2:
Address Line 3:
Municipality : CLIFFSIDE PARK
Postal City: CLIFFSIDE PARK
State: NJ
Zip: 07010

Party Information:

Current Party: Unaffiliated
Party Privilege Date: 02/21/2013

Miscellaneous:

Gender: Not Entered
Absentee Ballot Type: None
Registration Date: 01/31/2013
Registration Type: Mail-in without Identification
Last Action Taken Date: 02/21/2013

Status Information:

Voting Privilege Date: 02/21/2013
Current Status: Deleted
Date Last Voted:
Deleted Date: 02/21/2013
Deleted Reason: Administrative Action
Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Districts:

| | | | | | | |
|------------|----|----------|----|---------------|----|----------------|
| Ward | 00 | District | 03 | Congressional | 09 | Legislative 36 |
| Freeholder | | School | | Special | | Fire |

Previous Residence Addresses:

No Records Found for the Previous Residence Addresses

Election History:

No Records Found for the Election History

Previous Party:

No Records Found for the Previous Party

Previous Name:

No Records Found for the Previous Name

Registration History:

No Records Found for the Registration History

Miscellaneous Memo

**BESOEAD2 /
BERGEN**

Memo :

NOT A US CITIZEN


Close



New Jersey Voter Registration Application

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

**FOR OFFICIAL
USE ONLY**

| | | | | | |
|---|---|---|---|--|---|
| 1 Check boxes that apply: | | <input checked="" type="checkbox"/> New Registration | <input type="checkbox"/> Address Change | <input type="checkbox"/> Political Party Affiliation or Non-affiliation Change | Clerk <u>E RT</u> Registration # Office Time Stamp <input type="checkbox"/> by mail <input type="checkbox"/> in person |
| 2 Are you a U.S. Citizen? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If No, DO NOT complete this form) | | Will you be 18 years of age by the next election? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If No, DO NOT complete this form) | | | |
| 3 Last Name | First Name | Middle Name or Initial | Suffix (Jr., Sr., III) | | |
| Park | Soonja | | | | |
| 4 Date of Birth 03/07/1943 | | | | | |
| 5 NJ Driver's License Number or MVC Non-driver ID Number | | If you DO NOT have a NJ Driver's License or MVC Non-Driver ID, provide the last 4 digits of your Social Security Number. | | | |
| P 0 0 8 7 1 9 0 0 5 3 4 3 2 | | | | | |
| <input type="checkbox"/> "I swear or affirm that I DO NOT have a NJ Driver's License, MVC Non-driver ID or a Social Security Number." | | | | | |
| 6 Home Address (DO NOT use PO Box) | Apt. | Municipality | County | State | Zip Code |
| 321 1st Street | B | Cliffside Park | Bergen | NJ | 07010 |
| 7 Mailing Address if different from above | Apt. | Municipality | County | State | Zip Code |
| | | | | | |
| 8 Last Address Registered to Vote (DO NOT use PO Box) | Apt. | Municipality | County | State | Zip Code |
| | | | | | |
| 9 Former Name if Making Name Change | | a. Day Phone Number (Optional) | | | |
| | | b. E-Mail Address (Optional) | | | |
| 10 Do you wish to declare a political party affiliation? (Optional) | | <input type="checkbox"/> Yes, the party name is _____ <input checked="" type="checkbox"/> No, I do not wish to be affiliated with any political party. | | | |
| 11 Gender | Declaration - I swear or affirm that: <input checked="" type="checkbox"/> Female <input type="checkbox"/> Male • I am a U.S. Citizen • I live at the above address • I will be at least 18 years old on or before the next election | | | | |
| | • I will have resided in the State and county at least 30 days before the next election • I am not on parole, probation or serving a sentence due to a conviction for an indictable offense under any federal or state laws • I understand that any false or fraudulent registration may subject me to a fine of up to \$15,000, imprisonment up to 5 years, or both pursuant to R.S. 19:34-1 | | | | |
| Signature: Sign or mark and date on lines below | | | If applicant is unable to complete this form, print the name and address of individual who completed this form. | | |
| X  Date <u>1/25/13</u> | | | Name _____ Date _____ Address _____ | | |

Important Instructions for sections 5, 6 and 10

152556036



SOONJA PARK
321 B 1ST ST
CLIFFSIDE PARK NJ 07010

re registering to vote for the first time: If you do not have any of the provide cannot be verified, you will be asked to provide a COPY of a name and current address on it to avoid having to provide:

leased by any governmental agency. Any person who uses such penalties.

providing a contact point or the location where you spend most of your time.

- 10) You may declare a political affiliation or you may declare to be unaffiliated, regardless of any prior party affiliation. Completing section 10 is OPTIONAL and will not affect the acceptance of your voter registration application.

Need More Information? Check boxes below if you would like to receive more information about:

- ☐ voting by mail
☐ becoming a poll worker

- ☐ polling place accessibility
☐ voting if you have a disability, including visual impairment

- ☐ available election materials in this alternative language:

For further information visit Elections.NJ.gov or call toll-free 1-877-NJVOTER (1-877-658-6837)

Soonja Park
321 B 1st St.
Cliffside Park, NJ 07010

Feb 13, 2013

*RIC MM
2-21-13*

Regard: Cancel the Voter's Registration

To Whom It May Concern:

My name is Soonja Park, 69 years old with limited ability to read or write English.

I was asked to register the Voter's registration for the Section 8 rental assistance program, which I did not entirely understand. Without full comprehension, a voter's registration to Bergen County was sent on my behalf.

I acknowledge that I am not eligible for the Voter's Registration, because I'm not a citizen of the United States yet.

I would like to cancel my application for the voter's registration.

Thank you,

A large black rectangular redaction box covering the signature of Soonja Park.

Soonja Park

2013 FEB 21 AM 11 18
SUPERINTENDENT
OF ELECTORAL
Bergen County, NJ

PATRICIA DICOSTANZO
BERGEN COUNTY
SUPERINTENDENT OF ELECTIONS
1 BERGEN COUNTY PLAZA ROOM 380
HACKENSACK NJ 07601
PHONE: 201-336-6100
FAX: 201-336-6111

SOONJA PARK
321 B 1ST ST
CLIFFSIDE PARK NJ 07010

02/06/2013

Voter ID# 152556036



DOB 03/07/1943

Re: Follow-Up: Request of Identification Information
Voter Registration Application

Dear SOONJA PARK

You were previously requested to provide some form of identification with your voter registration application. To date, you have not responded or the information you provided could not be verified. In order to complete your application, kindly provide either your driver's license number or the last four digits of your social security number.

If you do not provide this information by the next election, you will have to show identification at the polling place, or provide a copy of an identifying document, if you vote by Mail-In ballot.

Kindly fill out the form on the reverse side of this letter and return it to this office in the enclosed self-addressed envelope. If you prefer, you may fax the form to the office at 201-336-6111.

Thank you for your cooperation in this matter.

Sincerely Yours,

PATRICIA DICOSTANZO
SUPERINTENDENT OF ELECTIONS

2013 FEB 21 PM 11 19
SUPERINTENDENT
OF ELECTIONS
BERGEN COUNTY, NJ

Voter Profile

User Printed: BESSPARS
Date: 03/30/2017

Voter Information:

Voter's Name: ALLAN S REYES
Date of Birth: 11/14/1968
Voter ID: 151993213
Legacy ID:
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit: A2
Suffix A:
Suffix B:
Street Number: 500
Street Name: MARLBORO RD
Address Line 2:
Address Line 3:
Municipality : WOODRIDGE
Postal City: WOODRIDGE
State: NJ
Zip: 07075

Party Information:

Current Party: Unaffiliated
Party Privilege Date:

Miscellaneous:

Gender: Not Entered
Absentee Ballot Type: None
Registration Date: 08/25/2011
Registration Type: Agency with Identification
Last Action Taken Date: 06/27/2013

Status Information:

Voting Privilege Date:
Current Status: Rejected
Date Last Voted:
Rejected Reason: Not a U.S Citizen/Checked off No to U.S. Citizenship
Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Districts:

| | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|-----------------------|
| Ward | 00 | District | 02 | Congressional | 09 | Legislative 36 |
| Freeholder | | School | | Special | | Fire |

Previous Residence Addresses:

| Change Date | Street Number | Street Name | Address Line 2 | Address Line 3 | Unit | Municipality | State | Zip Code |
|-------------|---------------|-------------|----------------|----------------|------|--------------|------------|----------|
| 06/27/2013 | 500 | MARLBORO RD | | | B5 | WOODRIDGE | New Jersey | 07075 |

Election History:

No Records Found for the Election History

Previous Party:

No Records Found for the Previous Party

Previous Name:

No Records Found for the Previous Name

Registration History:

No Records Found for the Registration History

12926555 **New Jersey Voter Registration Application**

I am applying to register to vote at the address listed on my NJ Drivers License/ID Card. I swear or affirm that:

- * I am a U.S. Citizen.
- * I reside at my DL/ID address displayed below.
- * I will be at least 18 years old on or before the next election.
- * I will have resided in the state and county at least 30 days before the next election.
- * I am not on parole, probation or serving sentence due to a conviction for an indictable offense under any federal or state laws.
- * I understand that any false or fraudulent registration may subject me to a fine up to \$15,000, imprisonment up to 5 years or both pursuant to R.S. 19:34-1.

Do you wish to declare a political party affiliation? (Optional)

() Yes, the party name is : _____ () No, I do not wish to be affiliated with any political party.

R2982 02682 11682 11-14-1968

ALLAN S REYES
500 MARLBORO RD APT B-5
WOOD RIDGE NJ 07075-0000 B

151993213



ALLAN S REYES
500 MARLBORO RD Apt-Unit B5
WOODRIDGE NJ C7075

LP LO201123700000511

not delivered within two (2) days return to:

Commissioner of Registration
1 Bergen County Plaza, Room 380
Hackensack, NJ 07601

RETURN SERVICE REQUESTED

YOU VOTE HERE
SU VOTO AQUI
여기서 투표하십시오

& ACCESSIBLE POLLING LOCATION

The Polling Place for this Election District is
El Lugar de Votación Para Este Distrito Electoral está en
귀하의 선거구 투표소는

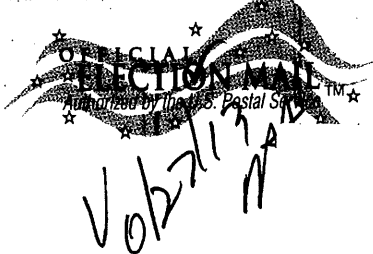
Woodridge

WARD NO.00 DISTRICT NO. 02
Senior Center All Purpose Room
Hackensack St Cor Of Highland Ave

BOROUGH OF WOOD-RIDGE

Polls Open/Las Encuestas Se Abren/투표소 개장시간 2 P.M. to 9 P.M.
Bergen County, NJ Tuesday, April 16, 2013
Condado de Bergen, NJ Martes, 16 de abril de 2013
뉴저지, 버겐 카운티 2013년 4월 16일 화요일

07601 1907510920



151993213



ALLAN S REYES
500 MARLBORO RD Apt-Unit A2
WOODRIDGE NJ 07075

NON-PROFIT ORG.
U.S. POSTAGE
PAID
COUNTY OF BERGEN
OFFICE OF THE
COUNTY CLERK



T3 P1 *****ECRWSS**C078



151993213

Allan S Reyes
500 Marlboro Rd Apt B5
Wood Ridge NJ 07075-1248

A 00 02

X 076 NFE 3 3121 00 04/10/13
FWD TIME EXP RTN TO SEND POSTAGE DUE
REYES
500 MARLBORO RD APT A2
WOOD RIDGE NJ 07075-1233

UNLESS HEAVY OR CARD-POSTAGE DUE = 46

07601 @9998





PATRICIA DI COSTANZO
SUPERINTENDENT OF ELECTIONS
COMMISSIONER OF REGISTRATION

BERGEN COUNTY
SUPERINTENDENT OF ELECTIONS
ONE BERGEN COUNTY PLAZA, ROOM 380
HACKENSACK, N. J. 07601
PHONE: (201) 336-6100
FAX: (201) 336-6111

151993213



ALLAN S REYES
500 MARLBORO RD Apt-Unit A2
WOODRIDGE NJ 07075

ATTN: A. ARIZIA
THERESA M. O'CONNOR
DEPUTY SUPERINTENDENT OF ELECTIONS
DEPUTY COMMISSIONER OF REGISTRATION

9-5-13

Dear Registrant:

Our office received your Voter Registration application and the following was not completed:

*Date of Birth _____

*You did not check if you are a US Citizen

Please mark with an X ☐ I am a US Citizen

☐ I am NOT a US Citizen

*You did not sign your application.

Signature

Print

Please return in the enclosed envelope

Sincerely,

Patricia DiCostanzo
Patricia DiCostanzo
Superintendent of Elections

2013 SEP 20 PM 9 55
SUPERINTENDENT
OF ELECTIONS
BERGEN COUNTY

9-16-13

151993213



ALLAN S REYES
500 MARLBORO RD Apt-Unit A2
WOODRIDGE NJ 07075

THERESA M. O'CONNOR
DEPUTY SUPERINTENDENT OF ELECTIONS
DEPUTY COMMISSIONER OF REGISTRATION

DEAR MADAM,

I AM RETURNING YOUR LETTER APPLICATION. I
WAS AT YOUR OFFICE LAST AUGUST 27, 2013 TO FIX
EVERYTHING AND ENCLOSED WAS THE PROOF THAT
MY NAME WAS REMOVED FROM THE ROLLS

I DO HOPE THAT THIS WILL EXPLAINED
EVERYTHING.

RESPECTFULLY

9/20/13
MS

2013 SEP 20 PM 9 51
SUPERINTENDENT
OF ELECTIONS
COUNTY CLERK
TREASURER



PATRICIA DI COSTANZO
SUPERINTENDENT OF ELECTIONS
COMMISSIONER OF REGISTRATION

BERGEN COUNTY
SUPERINTENDENT OF ELECTIONS
ONE BERGEN COUNTY PLAZA, ROOM 380
HACKENSACK, N. J. 07601
PHONE: (201) 336-6100
FAX: (201) 336-6111

THERESA M. O'CONNOR
DEPUTY SUPERINTENDENT OF ELECTIONS
DEPUTY COMMISSIONER OF REGISTRATION

August 27, 2013

Allan S. Reyes
50 Marlboro Road
Unit A2
Wood Ridge, NJ 07075

DOB: November 14, 1968

Allan S. Reyes registered to vote on August 25, 2011.

Mr. Reyes has never voted and was removed when he informed us that he was not a citizen at the time he was asked to register to vote at Motor Vehicle.

A certified copy of his voter profile, showing he was removed from the rolls, per his request, is enclosed.

If you have any questions, please do not hesitate to call this office.

Sincerely,

Theresa M. O'Connor
Deputy Superintendent of Elections

151993213



ALLAN S REYES
500 MARLBORO RD Apt-Unit A2
WOODRIDGE NJ 07075

SEP 20 2013
SUPERINTENDENT
OF ELECTIONS
BERGEN COUNTY

WOODRIDGE:2

Revised 03/09/99

SECTION FOR OFFICE OF U.S. SENATE

AUGUST 13, 2013

L THRU Z

mail-in-Ballot voter. -She did not receive
& Registered AS Democrat.

this book as a voter. However,
is in the Voter Box #151993213
a citizen but she is!!

ed out the Provisional Paperwork
Board Worker is Elaine McKhan.

Voter Profile

User Printed: BESOEAD2
Date: 03/30/2017

Voter Information:

Voter's Name: JHEINY RODRIGUEZ-GONZALE
Date of Birth: 01/10/1989
Voter ID: 152802599
Legacy ID:
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit:
Suffix A:
Suffix B:
Street Number: 251
Street Name: W ENGLEWOOD AVE
Address Line 2:
Address Line 3:
Municipality : ENGLEWOOD
Postal City: ENGLEWOOD
State: NJ
Zip: 07631

Party Information:

Current Party: Unaffiliated
Party Privilege Date:

Miscellaneous:

Gender: Not Entered
Absentee Ballot Type: None
Registration Date: 06/14/2014
Registration Type: Agency with Identification
Last Action Taken Date: 07/17/2014

Status Information:

Voting Privilege Date:
Current Status: Rejected
Date Last Voted:
Rejected Reason: Not a U.S Citizen/Checked off No to U.S. Citizenship
Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Districts:

| | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|-----------------------|
| Ward | 04 | District | 02 | Congressional | 09 | Legislative 37 |
| Freeholder | | School | | Special | | Fire |

Previous Residence Addresses:

No Records Found for the Previous Residence Addresses

Election History:

No Records Found for the Election History

Previous Party:

No Records Found for the Previous Party

Previous Name:

No Records Found for the Previous Name

Registration History:

No Records Found for the Registration History

145891587 New Jersey Voter Registration Application

I am applying to register to vote at the address listed on my NJ Drivers License/ID Card. I swear or affirm that:

- * I am a U.S. Citizen.
- * I reside at my DL/ID address displayed below.
- * I will be at least 18 years old on or before the next election.
- * I will have resided in the state and county at least 30 days before the next election.

* I am not on parole, probation or serving sentence due to a conviction for an indictable offense under any federal or state laws.

I understand that any false or fraudulent registration may subject me to a fine up to \$15,000, imprisonment up to 5 years or both pursuant to R.S. 19:34-1.

Do you wish to declare a political party affiliation? (Optional)

() Yes, the party name is : _____ () No, I do not wish to be affiliated with any political party.

R6094 40100 51892 01-10-1989

JHEINY RODRIGUEZ-GONZALE

251 WEST ENGLEWOOD AVE

ENGLEWOOD NJ 07631-3247 B



152802599



JHEINY RODRIGUEZ-GONZALE
251 W ENGLEWOOD AVE
ENGLEWOOD NJ 07631

2-7-7-14 JWC

SUPREMACY OF ELECTIONS
2014 JUN 20 AM 8 53



August 25, 2014

PATRICIA DICOSTANZO
SUPERINTENDENT OF ELECTIONS
1 BERGEN COUNTY PLAZA, ROOM 380
HACKENSACK, NJ 07601

152802599



JHEINY RODRIGUEZ-GONZALE
251 W ENGLEWOOD AVE
ENGLEWOOD NJ 07631

Dear Mrs. DICOSTANZO,

As per our conversation on the phone, as you requested, please be advise that on July 2014, I was applying to Bergen Community Collage online and by mistake, I chose the option to Register to Vote, I am a Permanent Resident of the United States since February 2014, I am not a Citizen; I'll really appreciate you to cancel that registration.

I thank you in advance for all your help and I sincerely apologize for any inconvenience this may have caused.

If you need further information do not hesitate to contact me at (201) 699-9845.

Cordially,

[Redacted signature block]

Jheiny Rodríguez González
251 West Englewood Ave.
Englewood, NJ 07631

SUPERINTENDENT
OF ELECTIONS
BERGEN COUNTY, N.J.
2014 AUG 28 AM 10 49



PATRICIA DI COSTANZO
SUPERINTENDENT OF ELECTIONS
COMMISSIONER OF REGISTRATION

BERGEN COUNTY
SUPERINTENDENT OF ELECTIONS
ONE BERGEN COUNTY PLAZA, ROOM 380
HACKENSACK, N. J. 07601
PHONE: (201) 336-6100
FAX: (201) 336-6111

THERESA M. O'CONNOR
DEPUTY SUPERINTENDENT OF ELECTIONS
DEPUTY COMMISSIONER OF REGISTRATION

October 6, 2014

Jheiny Rodriguez-Gonzalez
251 W Englewood Avenue
Englewood, NJ 07631

DOB: 01/10/1989

Dear Ms. Rodriguez-Gonzalez:

You registered to vote June 14, 2014. You wrote saying there was an error and that you are not a citizen and marked the card by mistake. The record reflects that you never voted.

A certified copy of your voter profile, showing you were removed from the rolls August 28, 2014, per your request, is enclosed.

If you have any questions, please do not hesitate to call this office.

Sincerely,

A handwritten signature in cursive script that reads "Patricia DiCostanzo".

Patricia DiCostanzo
Superintendent of Elections

If not delivered in two days, return to
Superintendent of Elections
1 Bergen County Plaza,
Room 380
Hackensack, NJ 07601

OFFICIAL
ELECTION MAIL

Authorized by the U.S. Postal Service

County of Bergen, New Jersey

Voter Acknowledgement Card

Recibo de tarjeta de votantes

유권자 확인 카드

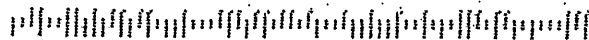
RETURN SERVICE REQUESTED

152802599 M-0215 W-04 D-02

JHEINY RODRIGUEZ-GONZALE
251 W ENGLEWOOD AVE
ENGLEWOOD NJ 07631

152802599 06/14/2014

0215 04 02



152802599



JHEINY RODRIGUEZ-GONZALE
251 W ENGLEWOOD AVE
ENGLEWOOD NJ 07631



NEW JERSEY GENERAL ASSEMBLY

VALERIE VAINIERI HUTTLE
ASSEMBLYWOMAN, 37TH DISTRICT
ONE ENGLE STREET
SUITE 108
ENGLEWOOD, NJ 07631
(201) 541-1118
FAX: (201) 541-1071
EMAIL: aswvainerihuttle@njleg.org

COMMITTEES
CHAIRWOMAN
HUMAN SERVICES
TOURISM AND ARTS
NEW JERSEY STATE COUNCIL
ON THE ARTS,
EX OFFICIO

August 7, 2014

152802599



JHEINY RODRIGUEZ-GONZALE
251 W ENGLEWOOD AVE
ENGLEWOOD NJ 07631

Dear Friend,

Thank you for registering to vote in the 37th Legislative District. I encourage your participation and welcome your voice in the political process.

Please know that as one of your state representatives in the New Jersey Assembly, I will carry your concerns to the Statehouse. I look forward to advocating on behalf of you and your family.

If you need any assistance or would like to share your thoughts with me, please do not hesitate to contact my office.

Sincerely,

VALERIE VAINIERI HUTTLE
Assemblywoman, District 37

145891587 New Jersey Voter Registration Application

I am applying to register to vote at the address listed on my NJ Drivers License/ID Card. I swear or affirm that:

- * I am a U.S. Citizen.
- * I reside at my DL/ID address displayed below.
- * I will be at least 18 years old on or before the next election.
- * I will have resided in the state and county at least 30 days before the next election.

I am not on parole, probation or serving sentence due to a conviction for an indictable offense under any federal or state laws.

I understand that any false or fraudulent registration may subject me to a fine up to \$15,000, imprisonment up to 5 years or both pursuant to R.S. 19:34-1.

Do you wish to declare a political party affiliation? (Optional)

() Yes, the party name is : _____ () No, I do not wish to be affiliated with any political party.

R6094 40100 51892 01-10-1989
JHEINY RODRIGUEZ-GONZALE
251 WEST ENGLEWOOD AVE
ENGLEWOOD NJ 07631-3247 B



152802599



JHEINY RODRIGUEZ-GONZALE
251 W ENGLEWOOD AVE
ENGLEWOOD NJ 07631

2014 JUN 20 AM 8 53

08/25/2014
Patti asked that she send a letter explaining her circumstances. She must sign it, explaining that she did not understand the explanation.
She is not a citizen.

Voter Profile

User Printed: BESOEAD2
Date: 03/30/2017

Voter Information:

Voter's Name: NAJIBULLA SAIFI
Date of Birth: 11/04/1969
Voter ID: 525338332
Legacy ID:
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit: C5
Suffix A:
Suffix B:
Street Number: 1558
Street Name: CENTER AVE
Address Line 2:
Address Line 3:
Municipality : FORT LEE
Postal City: FORT LEE
State: NJ
Zip: 07024

Party Information:

Current Party: Unaffiliated
Party Privilege Date:

Miscellaneous:

Gender: Not Entered
Absentee Ballot Type: None
Registration Date: 12/29/2015
Registration Type: Agency with Identification
Last Action Taken Date: 01/15/2016

Status Information:

Voting Privilege Date:
Current Status: Rejected
Date Last Voted:
Rejected Reason: Not a U.S Citizen/Checked off No to U.S. Citizenship
Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Districts:

| | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|-----------------------|
| Ward | 00 | District | 09 | Congressional | 09 | Legislative 37 |
| Freeholder | | School | | Special | | Fire |

Previous Residence Addresses:

| Change Date | Street Number | Street Name | Address Line 2 | Address Line 3 | Unit | Municipality | State | Zip Code |
|-------------|---------------|------------------------|----------------|----------------|------|--------------|------------|----------|
| 01/15/2016 | | 1558 CENTER AVE APT C5 | | | | FORT LEE | New Jersey | 07024 |

Election History:

No Records Found for the Election History

Previous Party:

No Records Found for the Previous Party

Previous Name:

No Records Found for the Previous Name

Registration History:

No Records Found for the Registration History

Motor Voter - Agency

Main Menu:

Activities

Inquiries

Voter Registration

Voter Mail-In Ballot Request

Voter Mail-In Ballot

Voter Election History

Voter Change Audit

Voter Deletions

County Data

Polling Place

Purged Voters

Voter DIA

MVC File

Reports

Help

Logout

Compare MVC - Agency

INCOMP DS 1/15/16P BES0EAD2/B

| MVC Voter | | | |
|-------------------------|--|----------------------------------|--|
| Name | NAJIBULLA SAIFI | Date of Birth | 11/04/1969 |
| Residence Address | 1558 CENTER AVE APT C5 FORT LEE NJ 07024-4615 | Mailing Address | |
| Driver's License Number | S01805770011692 | Original Driver's License Number | S01805770011692 |
| Card Number | | Previous DOB | 11/04/1969 |
| Previous Name | NAJIBULLA SAIFI | Previous Address | 1558 CENTER AVE APT C5 FORT LEE NJ 07024-4615 |
| MVC Transaction Date | 12/29/2015 | | |

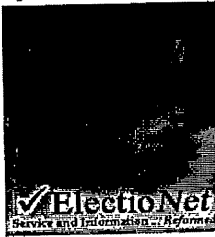
MVC Signature Date: 12/29/2015

Reject ☐ English:

Spanish:

Reject

No Card Issued



| SVRS Matched Voters | | | | | | | | | | |
|---|----------|------|---------------|-------------------|-------------------|-----------------|-------------------------|-----|-------------------|------|
| Select | Voter Id | Name | Date of Birth | Registration Date | Residence Address | Mailing Address | Driver's License Number | SSN | Confidence Factor | Stat |
| No Matching records Found. You can either choose to take No Action, Add or Reject this Motor Voter by clicking on the reject buttons. | | | | | | | | | | |

* under Status Reason indicates voter has multiple status reasons.

525338332



NAJIBULLA SAIFI
1558 CENTER AVE Apt-Unit C5
FORT LEE NJ 07024

☐ Duplicate ☐ Print List ☐ Display Signature

s matched statewide.

B (or)

1800) matched statewide.

index of First Name, DOB (Including 01/01/1800) matched statewide.
ne change.



New Jersey

Voter Registration Application

NOT A US CITIZEN

76

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

delete/citizen
Attn: Kathy/MVC

| | | | | | | |
|---|--|--|--------------------------|--|-------------|--|
| 1 Check boxes that apply: <input type="checkbox"/> New Registration <input type="checkbox"/> Name Change <input type="checkbox"/> Address Change <input type="checkbox"/> Political Party Affiliation <input checked="" type="checkbox"/> Signature Update or Non-affiliation Change | | | | | | FOR OFFICIAL USE ONLY Clerk 525338332 Registration # 1/27/16 Office Time Stamp |
| 2 Are you a U.S. Citizen? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If No, DO NOT complete this form) | | Will you be 18 years of age by the next election? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If No, DO NOT complete this form) | | | | |
| 3 Last Name SAIFI | | First Name NAJIBULLAH | | Middle Name or Initial Suffix (Jr., Sr., III) | | |
| 4 Date of Birth 11/04/69 | | | | | | |
| 5. NJ Driver's License Number or MVC Non-driver ID Number 801305770011622 | | | | | | |
| If you DO NOT have a NJ Driver's License or MVC Non-Driver ID, provide the last 4 digits of your Social Security Number. | | | | | | |
| <input checked="" type="checkbox"/> "I swear or affirm that I DO NOT have a NJ Driver's License, MVC Non-driver ID or a Social Security Number." | | | | | | |
| 6 Home Address (DO NOT use PO Box) 1558 center Avenue | | Apt. C5 | Municipality Port Lee | County | State NJ | Zip Code 07024 |
| 7 Mailing Address if different from above | | Apt. | Municipality | County | State | Zip Code |
| 8 Last Address Registered to Vote (DO NOT use PO Box) | | Apt. | Municipality | County | State | Zip Code |
| 9 Former Name if Making Name Change | | | | | | <input type="checkbox"/> by mail <input type="checkbox"/> in person |
| a. Day Phone Number (Optional) _____ b. E-Mail Address (Optional) _____ | | | | | | |
| 10 Do you wish to declare a political party affiliation? <input type="checkbox"/> Yes, the party name is _____ (Optional) <input checked="" type="checkbox"/> No, I do not wish to be affiliated with any political party. | | | | | | |
| 11 Gender <input type="checkbox"/> Female <input checked="" type="checkbox"/> Male | | Declaration - I swear or affirm that: <input checked="" type="checkbox"/> I am a U.S. Citizen <input checked="" type="checkbox"/> I live at the above address <input checked="" type="checkbox"/> I will be at least 18 years old on or before the next election <input type="checkbox"/> I will have resided in the State and county at least 30 days before the next election <input type="checkbox"/> I am not on parole, probation or serving a sentence due to a conviction for an indictable offense under any federal or state laws <input type="checkbox"/> I understand that any false or fraudulent registration may subject me to a fine of up to \$15,000, imprisonment up to 5 years, or both pursuant to R.S. 19:34-1 | | | | |
| Signature: Sign or mark and date on lines below X [Signature] Date 20/1/16 | | | | | | |
| If applicant is unable to complete this form, print the name and address of individual who completed this form. Name _____ Date _____ Address _____ | | | | | | |

Important Instructions for sections 5, 6 and 10

- 5) If you are completing this form by mail and are registering to vote for the first time: If you do not have any of the information verified, you will be asked to provide a COPY of a current and valid ID to avoid having to provide identification at the polling place. any governmental agency. Any person who uses such numbers
- 6) contact point or the location where you spend most of your time.
- 10) to be unaffiliated, regardless of any prior party affiliation; if you are a party member and wish to become unaffiliated, you must file this form no later than 55 days before the primary election in order to vote in the primary election. Completing section 10 is OPTIONAL and will not affect the acceptance of your voter registration application.

Need More Information? Check boxes below if you would like to receive more information about:

- | | | |
|---|---|---|
| <input type="checkbox"/> voting by mail | <input type="checkbox"/> polling place accessibility | <input type="checkbox"/> available election materials in this alternative language: |
| <input type="checkbox"/> becoming a poll worker | <input type="checkbox"/> voting if you have a disability, including visual impairment | |

For further information visit Elections.NJ.gov or call toll-free 1-877-NJVOTER (1-877-658-6837)

Voter Profile

User Printed: BESPTOGU
Date: 03/30/2017

Voter Information:

Voter's Name: MAXIMILIAN SDOUTZ
Date of Birth: 10/04/1946
Voter ID: 152677123
Legacy ID:
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit: 1
Suffix A:
Suffix B:
Street Number: 124
Street Name: GRAND ST
Address Line 2:
Address Line 3:
Municipality : GARFIELD
Postal City: GARFIELD
State: NJ
Zip: 07026

Party Information:

Current Party: Unaffiliated
Party Privilege Date:

Miscellaneous:

Gender: Not Entered
Absentee Ballot Type: None
Registration Date: 09/23/2013
Registration Type: Mail-in with Identification
Last Action Taken Date: 09/25/2013

Status Information:

Voting Privilege Date:
Current Status: Rejected
Date Last Voted:
Rejected Reason: Not a U.S Citizen/Checked off No to U.S. Citizenship
Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Districts:

| | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|-----------------------|
| Ward | 01 | District | 02 | Congressional | 09 | Legislative 35 |
| Freeholder | | School | | Special | | Fire |

Previous Residence Addresses:

No Records Found for the Previous Residence Addresses

Election History:

No Records Found for the Election History

Previous Party:

No Records Found for the Previous Party

Previous Name:

No Records Found for the Previous Name

Registration History:

No Records Found for the Registration History



New Jersey Voter Registration Application

76

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

| | | | | | | | | |
|---|--|---|---|---|----------------------------|-----------------------------|--|--------------------------|
| 1 Check boxes that apply: <input type="checkbox"/> New Registration <input type="checkbox"/> Address Change <input type="checkbox"/> Political Party Affiliation or Non-affiliation Change <input checked="" type="checkbox"/> Name Change <input type="checkbox"/> Signature Update | | | | | | FOR OFFICIAL USE ONLY | | |
| 2 Are you a U.S. Citizen? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If No, DO NOT complete this form) | | | Will you be 18 years of age by the next election? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If No, DO NOT complete this form) | | | Clerk <i>[Signature]</i> | | |
| 3 Last Name <i>Scoutz</i> | | First Name <i>Maximilian</i> | | Middle Name or Initial | Suffix (ex. Jr., Sr., III) | Registration # | | |
| 4 Date of Birth <i>10-1-1946</i> | | | | | | Office Time Stamp | | |
| 5 NJ Driver's License Number or MVC Non-driver ID Number <i>138-66-3292</i> If you DO NOT have a NJ Driver's License or MVC Non-Driver ID, provide the last 4 digits of your Social Security Number. <input type="checkbox"/> "I swear or affirm that I DO NOT have a NJ Driver's License, MVC Non-driver ID or a Social Security Number." | | | | | | | | |
| 6 Home Address (DO NOT use PO Box) <i>124 Grand St</i> | | Apt. <i>1</i> | Municipality <i>Garfield</i> | County <i>Bergen</i> | State <i>NJ</i> | | | Zip Code <i>07036</i> |
| 7 Mailing Address if different from above | | Apt. | Municipality | County | State | | | Zip Code |
| 8 Last Address Registered to Vote (DO NOT use PO Box) | | Apt. | Municipality | County | State | Zip Code | <input type="checkbox"/> by mail <input type="checkbox"/> in person | |
| 9 Former Name if Making Name Change | | | | Day Phone Number (Optional) | | | | |
| 10 Do you wish to declare a political party affiliation? <input type="checkbox"/> Yes, the party name is _____ (Optional) <input checked="" type="checkbox"/> No, I do not wish to be affiliated with any political party. | | | | | | | | |
| 11 Gender <input type="checkbox"/> Female <input checked="" type="checkbox"/> Male | | Declaration - I swear or affirm that: <input checked="" type="checkbox"/> I am a U.S. Citizen <input checked="" type="checkbox"/> I live at the above address <input checked="" type="checkbox"/> I will be at least 18 years old on or before the next election <input type="checkbox"/> I will have resided in the State and county at least 30 days before the next election <input type="checkbox"/> I am not on parole, probation or serving a sentence due to a conviction for an indictable offense under any federal or state laws <input type="checkbox"/> I understand that any false or fraudulent registration may subject me to a fine of up to \$15,000, imprisonment up to 5 years, or both pursuant to R.S. 19:34-1 | | | | | | |
| Signature: Sign or mark and date on line below <i>[Signature]</i> Date <i>5-28-13</i> | | | | If applicant is unable to complete this form, print the name and address of individual who completed this form. Name _____ Date _____ Address _____ | | | | |

152677123


 MAXIMILIAN SDOUTZ
 124 GRAND ST Apt-Unit 1
 GARFIELD NJ 07026

s 5, 6 and 10

When registering to vote for the first time: If you do not have any of the above information, you will be asked to provide a COPY of a current and valid address on it to avoid having to provide identification at the polling place. This information is not collected by any governmental agency. Any person who uses such numbers

- 6) If you are homeless, you may complete section 6 by providing a contact point or the location where you spend most of your time.
- 10) You may declare a political affiliation or you may declare to be unaffiliated, regardless of any prior party affiliation. Completing section 10 is Optional and will not affect the acceptance of your voter registration application.

Need More Information? Check boxes below if you would like to receive more information about:

- | | | |
|---|---|---|
| <input type="checkbox"/> voting by mail | <input type="checkbox"/> polling place accessibility | <input type="checkbox"/> available election materials in this alternative language: |
| <input type="checkbox"/> becoming a poll worker | <input type="checkbox"/> voting if you have a disability, including visual impairment | |

For further information visit www.NJElections.org or call toll-free 1-877-NJVOTER (1-877-658-6837)

MAXIMILIAN SDOVITZ

HILDA

Cell 973-868-8183

HUSBAND NOT A
CITIZEN.

Doesn't know who filled
this out.

* Wed 10/16/13 230pm
(spoke with wife - Hilda)



BERGEN COUNTY
SUPERINTENDENT OF ELECTIONS
ONE BERGEN COUNTY PLAZA, ROOM 380
HACKENSACK, N. J. 07601
PHONE: (201) 336-6100
FAX: (201) 336-6111

PATRICIA DI COSTANZO
SUPERINTENDENT OF ELECTIONS
COMMISSIONER OF REGISTRATION

THERESA M. O'CONNOR
DEPUTY SUPERINTENDENT OF ELECTIONS
DEPUTY COMMISSIONER OF REGISTRATION

October 16, 2013

Maximilian Sdoutz
124 Grand Street
Unit 1
Garfield, NJ 07026

DOB: October 4, 1946

Maximilian Sdoutz registered to vote on September 23, 2013.

Mr. Sdoutz has never voted and was removed when he informed us that he was not a citizen at the time he was asked to register to vote. Mr. Sdoutz does not remember completing the form however, he does acknowledge that this is his social security number and looks like his signature.

His wife, Hilda, notified the office that he is not a citizen.

A certified copy of his voter profile, showing he was removed from the rolls, per his request, is enclosed.

If you have any questions, please do not hesitate to call this office.

Sincerely,

A handwritten signature in cursive script that reads "Theresa M. O'Connor".

Theresa M. O'Connor
Deputy Superintendent of Elections

Voter Profile

User Printed: BESOEAD2
Date: 03/31/2017

Voter Information:

Voter's Name: KIRAN B SHAH
Date of Birth: 12/18/1948
Voter ID: 152378105
Legacy ID:
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit: 202B
Suffix A:
Suffix B:
Street Number: 132
Street Name: UNION AVE
Address Line 2:
Address Line 3:
Municipality : EAST RUTHERFORD
Postal City: EAST RUTHERFORD
State: NJ
Zip: 07073

Party Information:

Current Party: Unaffiliated
Party Privilege Date: 09/13/2012

Miscellaneous:

Gender: Not Entered
Absentee Ballot Type: None
Registration Date: 08/23/2012
Registration Type: Agency with Identification
Last Action Taken Date: 10/31/2013

Status Information:

Voting Privilege Date: 09/13/2012
Current Status: Deleted
Date Last Voted: 10/16/2013
Deleted Date: 10/31/2013
Deleted Reason: Administrative Action
Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Districts:

| | | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|--------------------|----|
| Ward | 00 | District | 01 | Congressional | 09 | Legislative | 36 |
| Freeholder | | School | | Special | | Fire | |

Previous Residence Addresses:

| Change Date | Street Number | Street Name | Address Line 2 | Address Line 3 | Unit | Municipality | State | Zip Code |
|-------------|---------------|--------------|----------------|----------------|------|--------------|------------|----------|
| 09/27/2012 | | 1405 51ST ST | | | | NORTH BERGEN | New Jersey | 07047 |

Election History:

| Election Date & Name | Election Type | Election Code | Ballot Type | County Voted In | Municipality Voted In | Party Affiliation | Memo User | Date Scanned | Date Counted | Ballot Status |
|--|---------------|-----------------------|-------------|-----------------|-----------------------|-------------------|-----------|--------------|--------------|---------------|
| 10/16/2013- SPECIAL GENERAL ELECTION FOR US SENATE | General | STATE SPECIAL GE 2013 | Machine | BERGEN | EAST RUTHERFORD | | BESJDOBO | 10/24/2013 | 10/16/2013 | |

Previous Party:

No Records Found for the Previous Party

Previous Name:

No Records Found for the Previous Name

Registration History:

No Records Found for the Registration History

EAST RUTHERFORD NJ 07073

Memo:

is not a citizen- 10/31/2013, BESOEADM
MVC AGENCY
MVC TRANSACTION DATE - 08/23/2012 ,BESOEAD2

[Previous](#)

BERGEN County Admin Message --> Have a nice day.

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1.9.0



BERGEN COUNTY
SUPERINTENDENT OF ELECTIONS
ONE BERGEN COUNTY PLAZA, ROOM 380
HACKENSACK, N. J. 07601
PHONE: (201) 336-6100
FAX: (201) 336-6111

PATRICIA DI COSTANZO
SUPERINTENDENT OF ELECTIONS
COMMISSIONER OF REGISTRATION

THERESA M. O'CONNOR
DEPUTY SUPERINTENDENT OF ELECTIONS
DEPUTY COMMISSIONER OF REGISTRATION

October 31, 2013

Kiran B Shah
132 Union Ave
Apt. 202B
East Rutherford NJ 07073

DOB: December 18, 1948

Kiran Shah was registered to vote at MVC on August 23, 2012.

Mr. Shah voted in the October 16, 2013 Special General Election for the US Senate. Mr. Shah claims that he brought his sample ballot to the polling location and indicated he was not a US Citizen. The poll workers told Mr. Shah that he was eligible to vote because he received the sample ballot in the mail. Mr. Shah met with Theresa O'Connor, the Deputy Superintendent of Elections, who advised him that he voted illegally because of his non-citizen status.

Mr. Shah was removed from the voter records in Bergen County on October 31, 2013. Ms. O'Connor advised him to keep a copy of this record in the event he is contacted by INS when he goes for his citizenship.

A certified copy of his voter profile, showing he was removed from the rolls, per his request, is enclosed.

If you have any questions, please do not hesitate to call this office.

Sincerely,

Theresa M. O'Connor
Deputy Superintendent of Elections

Kiyom B shah

132 Union Ave #202F

E. Rutherford.

NJ. 07073

Oct. 31, 2013

Subj: Registration to Vote

= Removing my name from the
voters' list

Ref: Your letter dt. Oct. 24, 2013

TO: Respected

Superintendent of Elections

County Plaza, Hackensack, NJ. 07601.

With reference to your above letter
dt. 10/24/13, I have not ever requested to
register to vote. I received "official sample
ballot" in my name by mail. So I
went to E. Rutherford Civic Center at Vreeland
Ave. on Oct. 16 afternoon by walk to
inquire about this. I told to three staff
members that I am not US citizen but
have received this letter. I was told by
them that I should vote. I thought that
it might be compulsory to vote here in US,
so I voted there. ~~Now~~ Now I request ~~you~~
herewith to remove/cancel my name
from the list.
Thanking you,

Truly Yours,



BERGEN COUNTY
SUPERINTENDENT OF ELECTIONS
ONE BERGEN COUNTY PLAZA, ROOM 380
HACKENSACK, N. J. 07601
PHONE: (201) 336-6100
FAX: (201) 336-6111

PATRICIA DI COSTANZO
SUPERINTENDENT OF ELECTIONS
COMMISSIONER OF REGISTRATION

THERESA M. O'CONNOR
DEPUTY SUPERINTENDENT OF ELECTIONS
DEPUTY COMMISSIONER OF REGISTRATION

May - - -
October 31, 2013

Kiran B Shah
132 Union Ave
Apt. 202B
East Rutherford NJ 07073

(973-767-3557)

DOB: December 18, 1948

Kiran Shah was registered to vote at MVC on August 23, 2012. ~~and~~ though he says that he has never applied for voter registration so far. ~~★~~
Mr. Shah voted in the October 16, 2013 Special General Election for the US Senate. Mr. Shah claims that he brought his sample ballot to the polling location and indicated he was not a US Citizen. The poll workers told Mr. Shah that he was eligible to vote because he received the sample ballot in the mail. Mr. Shah met with Theresa O'Connor, the Deputy Superintendent of Elections, who advised him that he voted illegally because of his non-citizen status.

then requested this office to delist his name and the office
Mr. Shah was removed from the voter records in Bergen County on October 31, 2013. Ms. O'Connor advised him to keep a copy of this record in the event he is contacted by INS when he goes for his citizenship.

A certified copy of his voter profile, showing he was removed from the rolls, per his request, is enclosed.

If you have any questions, please do not hesitate to call this office.

Sincerely,

Theresa M. O'Connor
Deputy Superintendent of Elections

★ But on Aug. 23, 2012, Mr. Shah has visited MVC Wallington for procedure to change in address (from North Bergen to East Rutherford) on his

Main Menu:

Activities

Inquiries

Voter Registration

Voter Election History

Voter Change Audit

Voter Deletions

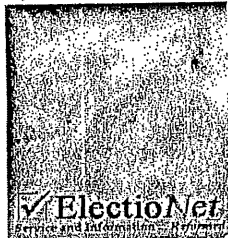
County Data

Purged Voters

Reports

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Compare MVC - Agency

BESPTOGU / BERGEN

Add- 9/27/12

| MVC Voter | | | |
|-------------------------|--|----------------------------------|--|
| Name | KIRAN B SHAH | Date of Birth | 12/18/1948 |
| Residence Address | 132 UNION AVE APT 202B E RUTHERFORD NJ 07073-1962 | Mailing Address | |
| Driver's License Number | S31424356212481 | Original Driver's License Number | S31424356212481 |
| Card Number | | Previous DOB | 12/18/1948 |
| Previous Name | KIRAN B SHAH | Previous Address | 1405 51ST ST NORTH BERGEN NJ 07047-3113 |
| MVC Transaction Date | 08/23/2012 | | |

Reject ☐ English:

Spanish:

Re

| SVRS Matched Voters | | | | | | | | | | | |
|-------------------------------------|-----------|--------------|---------------|-------------------|--|-----------------|-------------------------|-----|-------------------|---------|---|
| Select | Voter Id | Name | Date of Birth | Registration Date | Residence Address | Mailing Address | Driver's License Number | SSN | Confidence Factor | Status | Status Reason |
| <input checked="" type="checkbox"/> | 106301694 | KAREN B SHAW | 01/01/1800 | 01/27/1976 | 162 N LEHIGH AVE, CRANFORD, NJ 07016 | | | | 25 % | Deleted | Deceased |
| <input checked="" type="checkbox"/> | 116353384 | KAREN G SHAW | 01/01/1800 | 10/10/1989 | 190 PARSIPPANY RD, HANOVER TOWNSHIP, NJ 07981 | | | | 25 % | Deleted | Inactive Confirmation through two federal general elections |

* under Status Reason indicates voter has multiple status reasons.

1

Go

| | | | | | |
|--------|-----|------|--------------------|------------|-------------------|
| Select | Add | Back | No Action Required | Print List | Display Signature |
|--------|-----|------|--------------------|------------|-------------------|

152378105



KIRAN B SHAH
132 UNION AVE Apt-Unit 202B
EAST RUTHERFORD NJ 07073

matched statewide.

(or)

B00) matched statewide.

dex of First Name, DOB (including 01/01/1800) matched statewide.
ie change.

L THRU Z

AFF

| VOTER NO | NAME | ADDRESS | DOB | |
|-----------|-----------------------|-----------------------|------------|---|
| 152273309 | SHAH, CHINTAN M | 140 HACKENSACK ST 233 | 02/26/1982 | <div><div><div>VOTING AUTHOR</div><div>BOARD WORKER INITIALS</div><div>CHALLENGED</div></div><div>SIGNATURE OF VOTER - SHAH, CHINTAN M</div></div> |
| 152378105 | SHAH, KIRAN B | 132 UNION AVE 202B | 12/18/1948 | <div><div><div>VOTING AUTHOR</div><div>BOARD WORKER INITIALS</div><div>CHALLENGED</div></div><div>SIGNATURE OF VOTER - SHAH, KIRAN B</div></div> |
| 110109006 | SHAH, MINAL K | 160 HACKENSACK ST 246 | 08/12/1980 | <div><div><div>VOTING AUTHOR</div><div>BOARD WORKER INITIALS</div><div>CHALLENGED</div></div><div>SIGNATURE OF VOTER - SHAH, MINAL K</div><div>AFFIRMATION OF RESIDENCE REQUESTED</div></div> |
| 151833951 | SHAH, PIYUSH S | 160 HACKENSACK ST 209 | 10/15/1944 | <div><div><div>VOTING AUTHOR</div><div>BOARD WORKER INITIALS</div><div>CHALLENGED</div></div><div>SIGNATURE OF VOTER - SHAH, PIYUSH S</div></div> |
| 119441620 | SHAHRESTAN, IBTESAN G | 185 VAN WINKLE ST | 03/15/1965 | <div><div><div>VOTING AUTHOR</div><div>BOARD WORKER INITIALS</div><div>CHALLENGED</div></div><div>SIGNATURE OF VOTER - SHAHRESTAN, IBTESAN G</div><div>AFFIRMATION OF RESIDENCE REQUESTED</div></div> |
| 152461387 | SHAWA, YANGZOM | 11 EDISON PL FL1 | 04/29/1973 | <div><div><div>VOTING AUTHOR</div><div>BOARD WORKER INITIALS</div><div>CHALLENGED</div></div><div>SIGNATURE OF VOTER - SHAWA, YANGZOM</div></div> |

Voter Profile

User Printed: BESOEAD2
Date: 03/30/2017

Voter Information:

Voter's Name: LUIS A TABARA
Date of Birth: 02/13/1992
Voter ID: 524999312
Legacy ID:
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit: 4
Suffix A:
Suffix B:
Street Number: 159
Street Name: WALDO PL
Address Line 2:
Address Line 3:
Municipality : ENGLEWOOD
Postal City: ENGLEWOOD
State: NJ
Zip: 07631

Party Information:

Current Party: Unaffiliated
Party Privilege Date:

Miscellaneous:

Gender: Not Entered
Absentee Ballot Type: None
Registration Date: 11/24/2015
Registration Type: Agency with Identification
Last Action Taken Date: 12/15/2015

Status Information:

Voting Privilege Date:
Current Status: Rejected
Date Last Voted:
Rejected Reason: Not a U.S Citizen/Checked off No to U.S. Citizenship
Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Districts:

| | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|-----------------------|
| Ward | 01 | District | 04 | Congressional | 09 | Legislative 37 |
| Freeholder | | School | | Special | | Fire |

Previous Residence Addresses:

| Change Date | Street Number | Street Name | Address Line 2 | Address Line 3 | Unit | Municipality | State | Zip Code |
|-------------|---------------|-------------------|----------------|----------------|------|--------------|------------|----------|
| 12/15/2015 | | 178 WEST ST APT 2 | | | | ENGLEWOOD | New Jersey | 07631 |

Election History:

No Records Found for the Election History

Previous Party:

No Records Found for the Previous Party

Previous Name:

| Date Changed | Last Name | First Name | Middle Name | Suffix |
|--------------|-----------------|------------|-------------|--------|
| 01/04/2016 | TABARA-MARTILLO | LUIS | A | |

Registration History:

No Records Found for the Registration History

Main Menu:

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Compare MVC - Agency

Incomp OS 12/15/15

BESOEAD2 / B

| MVC Voter | | | |
|-------------------------|---|--|--|
| Name | LUIS A TABARA-MARTILLO | | Date of Birth |
| Residence Address | 159 WALDO PL APT 4 ENGLEWOOD NJ 07631-2376 | | Mailing Address |
| Driver's License Number | T00044946102921 | | Original Driver's License Number |
| Card Number | | | Previous DOB |
| Previous Name | LUIS A TABARA-MARTILLO | | Previous Address |
| MVC Transaction Date | 11/24/2015 | | 178 WEST ST APT 2 ENGLEWOOD NJ 07631-2312 |

MVC Signature Date: 11/24/2015

Reject ☐ English:☒ Spanish:

Reject

No Card Issued

| SVRS Matched Voters | | | | | | | | | | |
|---|----------|------|---------------|-------------------|-------------------|-----------------|-------------------------|-----|-------------------|--------|
| Select | Voter Id | Name | Date of Birth | Registration Date | Residence Address | Mailing Address | Driver's License Number | SSN | Confidence Factor | Status |
| No Matching records Found. You can either choose to take No Action, Add or Reject this Motor Voter by clicking on the re buttons. | | | | | | | | | | |

* under Status Reason indicates voter has multiple status reasons.

524999312



LUIS A TABARA-MARTILLO
159 WALDO PL Apt-Unit 4
ENGLEWOOD NJ 07631

hed statewide.

matched statewide.

of First Name, DOB (including 01/01/1800) matched statewide.
ange.





New Jersey

Voter Registration Application

NOT A US Citizen.

76

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

Sign Attn: Kathy/MVC

| | | | | | | |
|--|--|--|--|-----------------------------|-------|--|
| 1 Check boxes that apply: <input type="checkbox"/> New Registration <input type="checkbox"/> Address Change <input type="checkbox"/> Political Party Affiliation <input checked="" type="checkbox"/> Name Change <input checked="" type="checkbox"/> Signature Update or Non-affiliation Change | | | | | | FOR OFFICIAL USE ONLY Clerk 524999312 Registration # 1/5/16 Office Time Stamp SUPERINTENDENT OF ELECTIONS BERGEN COUNTY, NJ by <input type="checkbox"/> in person |
| 2 Are you a U.S. Citizen? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If No, DO NOT complete this form) | | Will you be 18 years of age by the next election? <input type="checkbox"/> Yes <input type="checkbox"/> No (If No, DO NOT complete this form) | | | | |
| 3 Last Name [REDACTED] | | First Name LUIS | | Middle Name or Initial A | | |
| 4 Date of Birth 13/02/1992 | | | | | | |
| 5 NJ Driver's License Number or MVC Non-driver ID Number T00044946102921 | | | | | | 2016 JAN 4 12:36 PM SUPERINTENDENT OF ELECTIONS BERGEN COUNTY, NJ |
| If you DO NOT have a NJ Driver's License or MVC Non-Driver ID, provide the last 4 digits of your Social Security Number. | | | | | | |
| <input type="checkbox"/> "I swear or affirm that I DO NOT have a NJ Driver's License, MVC Non-driver ID or a Social Security Number." | | | | | | |
| 6 Home Address (DO NOT use PO Box) 159 Waldo Pl | | | | | | |
| 7 Mailing Address if different from above | | Apt. | Municipality | County | State | Zip Code |
| | | 4 | Englewood | Bergen | NJ | 07631 |
| 8 Last Address Registered to Vote (DO NOT use PO Box) | | Apt. | Municipality | County | State | Zip Code |
| | | | | | | |
| 9 Former Name if Making Name Change | | | a. Day Phone Number (Optional) _____ b. E-Mail Address (Optional) _____ | | | |
| 10 Do you wish to declare a political party affiliation? <input type="checkbox"/> Yes, the party name is _____ (Optional) <input type="checkbox"/> No, I do not wish to be affiliated with any political party. | | | | | | |
| 11 Gender <input type="checkbox"/> Female <input checked="" type="checkbox"/> Male | | Declaration - I swear or affirm that: <ul style="list-style-type: none"> ● I am a U.S. Citizen ● I live at the above address ● I will be at least 18 years old on or before the next election ● I will have resided in the State and county at least 30 days before the next election ● I am not on parole, probation or serving a sentence due to a conviction for an indictable offense under any federal or state law ● I understand that any false or fraudulent registration may subject me to a fine of up to \$15,000, imprisonment up to 5 years, or both | | | | |
| Signature: Sign or mark and date on lines below [REDACTED] Date 29/12/15 | | | | | | |

524999312



LUIS A TABARA
 159 WALDO PL Apt-Unit 4
 ENGLEWOOD NJ 07631

Voter Profile

User Printed: BESPTOGU
Date: 03/30/2017

Voter Information:

Voter's Name: HAKAN TEZER
Date of Birth: 07/23/1972
Voter ID: 522854493
Legacy ID:
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit:
Suffix A:
Suffix B:
Street Number: 361
Street Name: FERN AVE
Address Line 2:
Address Line 3:
Municipality : LYNDHURST
Postal City: LYNDHURST
State: NJ
Zip: 07071

Party Information:

Current Party: Unaffiliated
Party Privilege Date:

Miscellaneous:

Gender: Not Entered
Absentee Ballot Type: None
Registration Date: 06/12/2015
Registration Type: Agency with Identification
Last Action Taken Date: 06/18/2015

Status Information:

Voting Privilege Date:
Current Status: Rejected
Date Last Voted:
Rejected Reason: Not a U.S Citizen/Checked off No to U.S. Citizenship
Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Districts:

| Ward | District | Congressional | Legislative |
|------------|----------|---------------|-------------|
| 00 | 07 | 09 | 36 |
| Freeholder | School | Special | Fire |

Previous Residence Addresses:

| Change Date | Street Number | Street Name | Address Line 2 | Address Line 3 | Unit | Municipality | State | Zip Code |
|-------------|---------------|-----------------|----------------|----------------|------|--------------|------------|----------|
| 06/18/2015 | | 70 EDGEWATER RD | | | | CLIFFSIDE PK | New Jersey | 07010 |

Election History:

No Records Found for the Election History

Previous Party:

No Records Found for the Previous Party

Previous Name:

No Records Found for the Previous Name

Registration History:

No Records Found for the Registration History

Main Menu:

Yes No

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Compare MVC - Agency

BESPTOGU / B

E/Katey (NS) 6/18/15

| MVC Voter | | | |
|-------------------------|--|----------------------------------|---|
| Name | HAKAN TEZER | Date of Birth | 07/23/1972 |
| Residence Address | 361 FERN AVENUE LYNDHURST NJ 07071-2213 | Mailing Address | |
| Driver's License Number | T29943110007722 | Original Driver's License Number | T29943110007722 |
| Card Number | | Previous DOB | 07/23/1972 |
| Previous Name | HAKAN TEZER | Previous Address | 70 EDGEWATER RD CLIFFSIDE PK NJ 07010-2923 |
| MVC Transaction Date | 06/12/2015 | | |

MVC Signature Date: 06/12/2015

Reject ☐ English:

Spanish:

Reject

No Card Issued

| SVRS Matched Voters | | | | | | | | | |
|---|----------|------|---------------|-------------------|-------------------|-----------------|-------------------------|-----|-------------------|
| Select | Voter Id | Name | Date of Birth | Registration Date | Residence Address | Mailing Address | Driver's License Number | SSN | Confidence Factor |
| No Matching records Found. You can either choose to take No Action, Add or Reject this Motor Voter by clicking on the reject buttons. | | | | | | | | | |

* under Status Reason indicates voter has multiple status reasons.

522854493



HAKAN TEZER
361 FERN AVE
LYNDHURST NJ 07071

Note:

If status is blank, that implies the voter status is Active.

If Confidence Factor is 100 %, that implies Driver's License Nu

If Confidence Factor is 50 %, that implies Last Name, First Na

Last Name, First Name, First Letter of Middle Name and DOB (

If Confidence Factor is 25 %, that implies Soundex of Last Nan

Name matching process includes MVC previous names if there


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New Jersey Voter Registration Application

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

Korhy

| | | | | | | | |
|--|--|--|--|------------------------|--|--|--|
| 1 Check boxes that apply: <input type="checkbox"/> New Registration <input checked="" type="checkbox"/> Address Change <input type="checkbox"/> Political Party Affiliation or Non-affiliation Change <input type="checkbox"/> Name Change <input type="checkbox"/> Signature Update | | | | | | FOR OFFICIAL USE ONLY Clerk Registration # 522854493 Office Time Stamp | |
| 2 Are you a U.S. Citizen? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If No, DO NOT complete this form) | | Will you be 18 years of age by the next election? <input type="checkbox"/> Yes <input type="checkbox"/> No (If No, DO NOT complete this form) | | | | | |
| 3 Last Name <u>Tezer</u> | | First Name <u>Hakan</u> | | Middle Name or Initial | | Suffix (Jr., Sr., III) | |
| 4 Date of Birth | | | | | | | |
| 5 NJ Driver's License Number or MVC Non-driver ID Number If you DO NOT have a NJ Driver's License or MVC Non-Driver ID, provide the last 4 digits of your Social Security Number. <input type="checkbox"/> "I swear or affirm that I DO NOT have a NJ Driver's License, MVC Non-driver ID or a Social Security Number." | | | | | | | |
| 6 Home Address (DO NOT use PO Box) | | | | Apt. | | Municipality | |
| 7 Mailing Address if different from above | | | | Apt. | | Municipality | |
| 8 Last Address Registered to Vote (DO NOT use PO Box) | | | | Apt. | | Municipality | |
| 9 Former Name if Making Name Change | | | | | | | |
| a. Day Phone Number (Optional) _____ b. E-Mail Address (Optional) _____ | | | | | | | |
| 10 Do you wish to declare a political party affiliation? <input type="checkbox"/> Yes, the party name is _____ (Optional) <input type="checkbox"/> No, I do not wish to be affiliated with any political party. | | | | | | | |
| 11 Gender <input type="checkbox"/> Female <input type="checkbox"/> Male | | Declaration - I swear or affirm that: <input checked="" type="checkbox"/> I am a U.S. Citizen <input checked="" type="checkbox"/> I live at the above address <input checked="" type="checkbox"/> I will be at least 18 years old on or before the next election <input type="checkbox"/> I will have resided in the State and county at least 30 days before the next election <input type="checkbox"/> I am not on parole, probation or serving a sentence due to a conviction for an indictable offense under any federal or state laws <input type="checkbox"/> I understand that any false or fraudulent registration may subject me to a fine of up to \$15,000, imprisonment up to 5 years, or both pursuant to R.S. 19:34-1 | | | | | |
| Signature: Sign or mark and date on lines below  Date <u>7/1/15</u> | | | | | | If applicant is unable to complete this form, print the name and address of individual who completed this form. Name <u>Hakan Tezer</u> Date <u>7/1/2015</u> Address <u>361 Fern Ave Apt 4</u> <u>Lyndhurst NJ 07031</u> | |

Important Instructions for sections 5, 6 and 10

522854493



HAKAN TEZER
361 FERN AVE
LYNDHURST NJ 07071

registering to vote for the first time: If you do not have any of the
 ide cannot be verified, you will be asked to provide a COPY of a
 d current address on it to avoid having to provide identification at the

sed by any governmental agency. Any person who uses such
 allies.

viding a contact point or the location where you spend most of

you may declare a political affiliation or you may declare to be unaffiliated, regardless of any prior party affiliation. Completing
 section 10 is OPTIONAL and will not affect the acceptance of your voter registration application.

Need More Information? Check boxes below if you would like to receive more information about:

- ☐ voting by mail
☐ becoming a poll worker

- ☐ polling place accessibility
☐ voting if you have a disability,
 including visual impairment

- ☐ available election materials in
 this alternative language:

For further information visit www.NJElections.org or call toll-free 1-877-NJVOTER (1-877-658-6837)

Voter Profile

User Printed: BESPTOGU
Date: 03/30/2017

Voter Information:

Voter's Name: DANKO TOMASEVIC
Date of Birth: 01/15/1980
Voter ID: 151344135
Legacy ID:
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit:
Suffix A:
Suffix B:
Street Number: 24
Street Name: ALBERT ST
Address Line 2:
Address Line 3:
Municipality : GARFIELD
Postal City: GARFIELD
State: NJ
Zip: 07026

Party Information:

Current Party: Unaffiliated
Party Privilege Date:

Miscellaneous:

Gender: Not Entered
Absentee Ballot Type: None
Registration Date: 10/28/2011
Registration Type: Agency with Identification
Last Action Taken Date: 10/24/2012

Status Information:

Voting Privilege Date:
Current Status: Rejected
Date Last Voted:
Rejected Reason: Not a U.S Citizen/Checked off No to U.S. Citizenship
Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Districts:

| | | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|--------------------|----|
| Ward | 05 | District | 01 | Congressional | 09 | Legislative | 35 |
| Freeholder | | School | | Special | | Fire | |

Previous Residence Addresses:

| Change Date | Street Number | Street Name | Address Line 2 | Address Line 3 | Unit | Municipality | State | Zip Code |
|-------------|---------------|-------------------------|----------------|----------------|------|---------------|------------|----------|
| 01/27/2012 | 218 | OVERMOUNT AVE | | | A | WOODLAND PARK | New Jersey | 07424 |
| 05/14/2010 | | 218 OVERMOUNT AVE APT A | | | | WEST PATERSON | New Jersey | 07424 |

Election History:

No Records Found for the Election History

Previous Party:

No Records Found for the Previous Party

Previous Name:

No Records Found for the Previous Name

Registration History:

Prior County

PASSAIC

Registration Date

05/04/2010

Last Status

Active

Date of Status

Status Reason

Date of Transfer

01/27/2012

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Incomp-No Sign

sent letter

T-1/27/12PT

| MVC Voter | | | |
|-------------------------|--|----------------------------------|--|
| Name | DANKO TOMASEVIC | Date of Birth | 01/15/1980 |
| Residence Address | 24 ALBERT ST GARFIELD NJ 07026-2130 | Mailing Address | |
| Driver's License Number | T63281540001802 | Original Driver's License Number | T63281540001802 |
| Card Number | | Previous DOB | 01/15/1980 |
| Previous Name | DANKO TOMASEVIC | Previous Address | 218 OVERMOUNT AVE APT A WOODLAND PARK NJ 07424-3269 |
| MVC Transaction Date | 10/28/2011 | | |

Reject ☐ English:☒ Spanish:

| SVRS Matched Voters | | | | | | | | | |
|-------------------------------------|-----------|-----------------|---------------|-------------------|--|-----------------|-------------------------|-----|-------------------|
| Select | Voter Id | Name | Date of Birth | Registration Date | Residence Address | Mailing Address | Driver's License Number | SSN | Confidence Factor |
| <input checked="" type="checkbox"/> | 151344135 | DANKO TOMASEVIC | 01/15/1980 | 05/04/2010 | 218 OVERMOUNT AVE, Apt-Unit A, WOODLAND PARK, NJ 07424 | | T63281540001802 | | 100 % |

* under Status Reason indicates voter has multiple status reasons.

151344135



DANKO TOMASEVIC
24 ALBERT ST
GARFIELD NJ 07026

1

☐ Go

No Action Required

Print List

If status is blank, that implies the voter status is Active.

If Confidence Factor is 100 %, that implies Driver's License Number is matched statewide.

If Confidence Factor is 50 %, that implies Last Name, First Name, DOB (or)

Last Name, First Name, First Letter of Middle Name and DOB (01/01/1800) matched statewide.

If Confidence Factor is 25 %, that implies Soundex of Last Name, Soundex of First Name, DOB (including matched statewide).

Name matching process includes MVC previous names if there is a name change.

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PATRICIA DI COSTANZO
SUPERINTENDENT OF ELECTIONS
COMMISSIONER OF REGISTRATION

151344135



DANKO TOMASEVIC
24 ALBERT ST
GARFIELD NJ 07026

BERGEN COUNTY
SUPERINTENDENT OF ELECTIONS
ONE BERGEN COUNTY PLAZA, ROOM 380
HACKENSACK, N. J. 07601
PHONE: (201) 336-6100
FAX: (201) 336-6111

*Not US
Citizen*

THERESA M. O'CONNOR
DEPUTY SUPERINTENDENT OF ELECTIONS
DEPUTY COMMISSIONER OF REGISTRATION

*T 10/24/12
also*

Dear Registrant:

Our office received your Voter Registration application and the following was not completed:

*Date of Birth 01/15/1980

*You did not check if you are a US Citizen

Please mark with an X ☐ I am a US Citizen
 ☒ I am NOT a US Citizen

*You did not sign your application.

[Redacted Signature]

Signature
DANKO TOMASEVIC

Print

Please return in the enclosed envelope by October 18, 2012.

Sincerely,
Patricia DiCostanzo
Patricia DiCostanzo
Superintendent of Elections

2012 OCT 23 PM 12:17
SUPERINTENDENT
OF ELECTIONS
BERGEN COUNTY, N.J.

Voter Profile

User Printed: BESOEAD2
Date: 03/30/2017

Voter Information:

Voter's Name: SHOIRA Z TORRES
Date of Birth: 01/11/1965
Voter ID: 525086459
Legacy ID:
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit: 1512
Suffix A:
Suffix B:
Street Number: 200
Street Name: WINSTON DR
Address Line 2:
Address Line 3:
Municipality : CLIFFSIDE PARK
Postal City: CLIFFSIDE PARK
State: NJ
Zip: 07010

Party Information:

Current Party: Unaffiliated
Party Privilege Date:

Miscellaneous:

Gender: Not Entered
Absentee Ballot Type: None
Registration Date: 12/08/2015
Registration Type: Agency with Identification
Last Action Taken Date: 12/22/2015

Status Information:

Voting Privilege Date:
Current Status: Rejected
Date Last Voted:
Rejected Reason: Not a U.S Citizen/Checked off No to U.S. Citizenship
Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Districts:

| | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|-----------------------|
| Ward | 00 | District | 14 | Congressional | 09 | Legislative 36 |
| Freeholder | | School | | Special | | Fire |

Previous Residence Addresses:

| Change Date | Street Number | Street Name | Address Line 2 | Address Line 3 | Unit | Municipality | State | Zip Code |
|-------------|---------------|--------------------------|----------------|----------------|------|----------------|------------|----------|
| 12/22/2015 | | 792 FAIRVIEW LANE 2ND FL | | | | CLIFFSIDE PARK | New Jersey | 07010 |

Election History:

No Records Found for the Election History

Previous Party:

No Records Found for the Previous Party

Previous Name:

No Records Found for the Previous Name

Registration History:

No Records Found for the Registration History

Motor Voter - Agency

Page 1 of 1

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Compare MVC - Agency

INCOMP DS 12/22/15 BES02 / B

| MVC Voter | | | |
|-------------------------|---|----------------------------------|--|
| Name | SHOIRA Z TORRES | Date of Birth | 01/11/1965 |
| Residence Address | 200 WINSTON DR APT 1512 CLIFFSIDE PARK NJ 07010-3221 | Mailing Address | |
| Driver's License Number | T66467098951652 | Original Driver's License Number | T66467098951652 |
| Card Number | | Previous DOB | 01/11/1965 |
| Previous Name | SHOIRA Z TORRES | Previous Address | 792 FAIRVIEW LANE 2ND FL CLIFFSIDE PARK NJ 07010-2113 |
| MVC Transaction Date | 12/08/2015 | | |

MVC Signature Date: 12/08/2015

Reject ☐ English:

☒ Spanish:

Reject

No Card Issued

| SVRS Matched Voters | | | | | | | | | | |
|--|----------|------|---------------|-------------------|-------------------|-----------------|-------------------------|-----|-------------------|------|
| Select | Voter Id | Name | Date of Birth | Registration Date | Residence Address | Mailing Address | Driver's License Number | SSN | Confidence Factor | Stat |
| No Matching records Found. You can either choose to take No Action, Add or Reject this Motor Voter by clicking on the re: buttons. | | | | | | | | | | |

* under Status Reason Indicates voter has multiple status reasons.

Duplicate

Print List

Display Signature

525086459



SHOIRA Z TORRES
200 WINSTON DR Apt-Unit 1512
CLIFFSIDE PARK NJ 07010

ched statewide.

) matched statewide.

of First Name, DOB (Including 01/01/1800) matched statewide.
ange.




NOT A US Citizen.

76



New Jersey Voter Registration Application

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

| | | | | | | |
|---|---|---|--|-----------------|-----------------------|---|
| 1 Check boxes that apply: <input type="checkbox"/> New Registration <input type="checkbox"/> Name Change <input type="checkbox"/> Address Change <input checked="" type="checkbox"/> Signature Update <input type="checkbox"/> Political Party Affiliation or Non-affiliation Change | | | | | | FOR OFFICIAL USE ONLY Clerk: Kathy/MVC Registration # 525086459 Office Time Stamp |
| 2 Are you a U.S. Citizen? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If No, DO NOT complete this form) | | Will you be 18 years of age by the next election? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If No, DO NOT complete this form) | | | | |
| 3 Last Name <u>Torres</u> | First Name <u>Shoira</u> | Middle Name or Initial <u>S.T</u> | Suffix (Jr., Sr., III) | | | |
| 4 Date of Birth <u>01.11.1965</u> | | | | | | |
| 5 NJ Driver's License Number or MVC Non-driver ID Number <u>T6646 70989 51652</u> If you DO NOT have a NJ Driver's License or MVC Non-Driver ID, provide the last 4 digits of your Social Security Number. <input type="checkbox"/> "I swear or affirm that I DO NOT have a NJ Driver's License, MVC Non-driver ID or a Social Security Number." | | | | | | |
| 6 Home Address (DO NOT use PO Box) <u>200 Winston Dr.</u> | Apt. <u>1512</u> | Municipality | County <u>Bergen</u> | State <u>NJ</u> | Zip Code <u>07010</u> | |
| 7 Mailing Address if different from above <u>the same</u> | Apt. | Municipality | County | State | Zip Code | |
| 8 Last Address Registered to Vote (DO NOT use PO Box) <u>247 Graves Str. S.I.</u> | Apt. | Municipality | County | State <u>NY</u> | Zip Code <u>10314</u> | |
| 9 Former Name if Making Name Change <u>None</u> | | a. Day Phone Number (Optional) <u>347-424-8023</u> b. E-Mail Address (Optional) | | | | |
| 10 Do you wish to declare a political party affiliation? (Optional) <input type="checkbox"/> Yes, the party name is _____ <input checked="" type="checkbox"/> No, I do not wish to be affiliated with any political party. | | | | | | |
| 11 Gender <input checked="" type="checkbox"/> Female <input type="checkbox"/> Male | Declaration - I swear or affirm that: ● I am a U.S. Citizen ● I live at the above address ● I will be at least 18 years old on or before the next election ● I will have resided in the State and county at least 30 days before the next election ● I am not on parole, probation or serving a sentence due to a conviction for an indictable offense under any federal or state laws ● I understand that any false or fraudulent registration may subject me to a fine of up to \$15,000, imprisonment up to 5 years, or both pursuant to R.S. 19:34-1 | | | | | |
| Signature: Sign or mark and date on lines below <u>X</u>  Date <u>1-2-16</u> | | | If applicant is unable to complete this form, print the name and address of individual who completed this form. Name _____ Date _____ Address _____ | | | |

Important Instructions for sections 5, 6 and 10

5

525086459



SHOIRA Z TORRES
200 WINSTON DR Apt-Unit 1512
CLIFFSIDE PARK NJ 07010

6

registering to vote for the first time: If you do not have any of the information cannot be verified, you will be asked to provide a COPY of a current address on it to avoid having to provide identification at the

by any governmental agency. Any person who uses such services.

ding a contact point or the location where you spend most of

10) You may declare a political affiliation or you may declare to be unaffiliated, regardless of any prior party affiliation. Completing section 10 is OPTIONAL and will not affect the acceptance of your voter registration application.

Need More Information? Check boxes below if you would like to receive more information about:

- ☐ voting by mail
- ☐ becoming a poll worker

- ☐ polling place accessibility
- ☐ voting if you have a disability, including visual impairment

- ☐ available election materials in this alternative language:

For further information visit www.NJElections.org or call toll-free 1-877-NJVOTER (1-877-658-6837)

Voter Profile

User Printed: BESOEAD2
Date: 03/30/2017

Voter Information:

Voter's Name: MAHAHOUA TOURE
Date of Birth: 04/18/1968
Voter ID: 152553660
Legacy ID:
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit:
Suffix A:
Suffix B:
Street Number: 25
Street Name: ENOCH ST
Address Line 2: FL 2
Address Line 3:
Municipality : EAST RUTHERFORD
Postal City: EAST RUTHERFORD
State: NJ
Zip: 07073

Party Information:

Current Party: Unaffiliated
Party Privilege Date:

Miscellaneous:

Gender: Not Entered
Absentee Ballot Type: None
Registration Date: 09/29/2011
Registration Type: Agency with Identification
Last Action Taken Date: 05/21/2015

Status Information:

Voting Privilege Date:
Current Status: Rejected
Date Last Voted:
Rejected Reason: Not a U.S Citizen/Checked off No to U.S. Citizenship
Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Districts:

| Ward | District | Congressional | Legislative |
|------------|----------|---------------|-------------|
| 00 | 02 | 09 | 36 |
| Freeholder | School | Special | Fire |

Previous Residence Addresses:

| Change Date | Street Number | Street Name | Address Line 2 | Address Line 3 | Unit | Municipality | State | Zip Code |
|-------------|---------------|--------------------------|----------------|----------------|------|-----------------|------------|----------|
| 06/02/2014 | 85 | UNION ST | 2ND FL | | | EAST RUTHERFORD | New Jersey | 07073 |
| 02/04/2013 | | 541 SECOND AVENUE 2ND FL | | | | LYNDHUST | New Jersey | 07071 |

Election History:

No Records Found for the Election History

Previous Party:

No Records Found for the Previous Party

Previous Name:

No Records Found for the Previous Name

Registration History:

No Records Found for the Registration History

Main Menu:

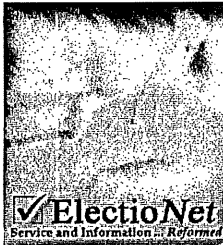
Activities

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Compare MVC - Agency

BESOEA2 / BERGEN

| MVC Voter | | | |
|--------------------------------|--|--|--|
| Name | MAHAHOA TOURE | | Date of Birth 04/18/1968 |
| Residence Address | 85 UNION ST 2ND FL E RUTHERFORD NJ 07073-1018 | | Mailing Address |
| Driver's License Number | T68195090054682 | | Original Driver's License Number T68195090054682 |
| Card Number | | | Previous DOB 04/18/1968 |
| Previous Name | MAHAHOA TOURE | | Previous Address 541 SECOND AVENUE 2ND FL LYNDHUST NJ 07071-1512 |
| MVC Transaction Date | 09/29/2011 | | |

Reject ☐ English:

☒ Spanish:

Reject

MVC Signature Date:

No Card Issued

Reject
Signature
from
Importing

| SVRS Matched Voters | | | | | | | | | | | |
|-------------------------------------|-----------|-------------|---------------|-------------------|-------------------------------------|-----------------|-------------------------|-----|-------------------|---------|--|
| Select | Voter Id | Name | Date of Birth | Registration Date | Residence Address | Mailing Address | Driver's License Number | SSN | Confidence Factor | Status | Status Reason |
| <input checked="" type="checkbox"/> | 121109064 | M FLOR TORO | 01/01/1800 | 11/06/1984 | 446 MONROE ST, PASSAIC, NJ 07055 | | | | 25 % | Deleted | Inactive Confirmation through two federal general elections |

* under Status Reason indicates voter has multiple status reasons.

152553660



MAHAHOA TOURE
 85 UNION ST
 2ND FL
 EAST RUTHERFORD NJ 07073

Select Add Back No Action

Note:

If status is blank, that implies the voter status is Active.

If Confidence Factor is 100 %, that implies Driver's License Number

If Confidence Factor is 50 %, that implies Last Name, First Name, Last Name, First Name, First Letter of Middle Name and DOB (01/01/1800, including Statewide)

If Confidence Factor is 25 %, that implies Soundex of Last Name, Soundex of First Name, DOB (including 01/01/1800) matched statewide.

Name matching process includes MVC previous names if there is a name change.

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S MAY 26 2015

NR
SL 4/24/14

BESKSINC

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Batch Scanning

Messaging

MVC DL Search

Inquiries

Reports

Help

Logout

Compare MVC File - Online Voter

| MVC Voter | | | |
|-------------------------|--|----------------------------------|--|
| Name | MAHAHOA TOURE | Date of Birth | 04/18/1968 |
| Residence Address | 25 ENOCH ST 2ND FL E RUTHERFORD NJ 07073-1412 | Mailing Address | |
| Driver's License Number | T68195090054682 | Original Driver's License Number | T68195090054682 |
| Card Number | | Previous DOB | 04/18/1968 |
| Previous Name | MAHAHOA TOURE | Previous Address | 85 UNION ST 2ND FL E RUTHERFORD NJ 07073-1018 |
| MVC Transaction Date | 06/02/2014 | | |

MVC Signature Date: 11/16/2010

Reject ☐ English:

☒ Spanish:

Reject

| SVRS Matched Voters | | | | | | | | | |
|--|----------|------|---------------|-------------------|-------------------|-----------------|-------------------------|-----|-------------------|
| Select | Voter Id | Name | Date of Birth | Registration Date | Residence Address | Mailing Address | Driver's License Number | SSN | Confidence Factor |
| No Matching records Found. You can either choose to take No Action, Add or Reject this Motor Voter by clicking on the buttons. | | | | | | | | | |

* under Status Reason indicates voter has multiple status reasons.

Select

Add

Back

No Action Required

Print List

Display Signature

Notr

itewide.

ed statewide.

Name, DOB (including 01/01/1800) matched statewide.

152553660



MAHAHOA TOURE
25 ENOCH ST
FL 2
EAST RUTHERFORD NJ 07073

©201

Inquiry - Voter Change Audit History**BESOEAD2 /
BERGEN****Voter Name:** MAHAHOUA TOURE

| Change Audit History: | | | | | | |
|------------------------|----------|-------------|--|-----------------|--|---|
| Audit Date/Time | Type | Change Date | Change Reason | Changed User ID | Type of Change | Change Memo |
| 05/27/2015 01:27 PM | Rejected | 05/27/2015 | Voter Requested | BESMTOWN | Other | NOT A CITIZEN PER VOTER PHONE CALL |
| 05/27/2015 01:25 PM | Rejected | 05/27/2015 | Not a U.S Citizen/Checked off No to U.S. Citizenship | BESMTOWN | Status, Other | |
| 05/21/2015 08:58 AM | Change | 06/02/2014 | User Determined | BESKSINC | Residence Address, Status, Other | |
| 06/13/2013 09:01 AM | Change | 06/13/2013 | No signature | BESJDOBO | Status, Other | |
| 02/04/2013 11:12 AM | Add | | New Voter | BESOEAD2 | | |

[Close](#)[Print List](#)

Voter Profile

User Printed: BESOEAD2
Date: 03/29/2017

Voter Information:

Voter's Name: YUAN Y VERGARA
Date of Birth: 12/26/1984
Voter ID: 152479732
Legacy ID:
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit:
Suffix A:
Suffix B:
Street Number: 133
Street Name: W MAIN ST
Address Line 2:
Address Line 3:
Municipality : BERGENFIELD
Postal City: BERGENFIELD
State: NJ
Zip: 07621

Party Information:

Current Party: Unaffiliated
Party Privilege Date:

Miscellaneous:

Gender: Not Entered
Absentee Ballot Type: None
Registration Date: 10/02/2012
Registration Type: Agency with Identification
Last Action Taken Date: 10/25/2012

Status Information:

Voting Privilege Date:
Current Status: Rejected
Date Last Voted:
Rejected Reason: Not a U.S Citizen/Checked off No to U.S. Citizenship
Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Districts:

| | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|-----------------------|
| Ward | 00 | District | 17 | Congressional | 05 | Legislative 38 |
| Freeholder | | School | | Special | | Fire |

Previous Residence Addresses:

| Change Date | Street Number | Street Name | Address Line 2 | Address Line 3 | Unit | Municipality | State | Zip Code |
|-------------|---------------|-------------------|----------------|----------------|------|--------------|------------|----------|
| 10/18/2012 | | 133 WEST MAIN ST. | | | | BERGENFIELD | New Jersey | 07621 |

Election History:

No Records Found for the Election History

Previous Party:

No Records Found for the Previous Party

Previous Name:

No Records Found for the Previous Name

Registration History:

No Records Found for the Registration History

October 23, 2012

Yuan Y. [REDACTED]
133 W. Main St
Bergenfield, NJ 07621

10/25/12
colt

To Whom It May Concern,

Recently, I renewed my New Jersey driver's license, while completing the renewal application; despite the fact that I stated on my renewal application and verbally expressing that I did not wish to register, the DMV employee erroneously filled out a voter registration form with my information without my consent. I am not a US citizen, therefore not eligible to do so. Please disregard the application filed.

I would appreciate receiving written confirmation of this cancellation. Additionally if there are any questions or anything else that is needed from me, please do not hesitate to contact me at 201-374-1430 or 201-888-2072. I look forward to your prompt attention to this matter.

Sorry for the inconvenience this might cause.

Thank you.

[REDACTED]
Yuan Y. Vergara
10/23/2012

152479732



YUAN Y VERGARA
133 W MAIN ST
BERGENFIELD NJ 07621

SUPERINTENDENT
OF ELECTIONS
BERGEN COUNTY, N.J.
2012 OCT 25 AM 10 42

Voter Profile

User Printed: BESOEAD2
Date: 03/30/2017

Voter Information:

Voter's Name: KAI W WANG
Date of Birth: 01/31/1992
Voter ID: 152626544
Legacy ID:
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit: 312
Suffix A:
Suffix B:
Street Number: 300
Street Name: WINSTON DR
Address Line 2:
Address Line 3:
Municipality : CLIFFSIDE PARK
Postal City: CLIFFSIDE PARK
State: NJ
Zip: 07010

Party Information:

Current Party: Unaffiliated
Party Privilege Date:

Miscellaneous:

Gender: Not Entered
Absentee Ballot Type: None
Registration Date: 05/02/2013
Registration Type: Agency with Identification
Last Action Taken Date: 09/10/2013

Status Information:

Voting Privilege Date:
Current Status: Rejected
Date Last Voted:
Rejected Reason: Not a U.S Citizen/Checked off No to U.S. Citizenship
Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Districts:

| | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|-----------------------|
| Ward | 00 | District | 15 | Congressional | 09 | Legislative 36 |
| Freeholder | | School | | Special | | Fire |

Previous Residence Addresses:

| Change Date | Street Number | Street Name | Address Line 2 | Address Line 3 | Unit | Municipality | State | Zip Code |
|-------------|---------------|------------------------|----------------|----------------|------|--------------|------------|----------|
| 06/20/2013 | | 300 WINSTIN DR APT 312 | | | | CLIFFSIDE PK | New Jersey | 07010 |

Election History:

No Records Found for the Election History

Previous Party:

No Records Found for the Previous Party

Previous Name:

No Records Found for the Previous Name

Registration History:

No Records Found for the Registration History

Main Menu:

Activities

Voter Registration

Add/Change Voter

Voter With No DOB

Voter Address Change

Confirmation

Voter Address Change

Confirmation Export

MVC - Agency

MVC File Online Voter

Voters who have

Verification / Postal Notice

Verif. and Ack. Card Export

MVC Manual Update

Maintain Voter History

Maintain County Data

Elections

System

Poll Book Printing Schedule

Duplicate Voters

Batch Scanning

Messaging

MVC DL Search

Backend Reporting

Document Imaging

Handheld Scanning

Inquiries

Reports

Help

Logout

Compare MVC - Agency

BESOEAD2 / BERGEN

| MVC Voter | | | |
|-------------------------|--|----------------------------------|--|
| Name | KAI W WANG | Date of Birth | 01/31/1992 |
| Residence Address | 300 WINSTON DR APT 312 CLIFFSIDE PK NJ 07010-3210 | Mailing Address | |
| Driver's License Number | W04184248651921 | Original Driver's License Number | W04184248651921 |
| Card Number | | Previous DOB | 01/31/1992 |
| Previous Name | KAI W WANG | Previous Address | 300 WINSTON DR APT 312 CLIFFSIDE PK NJ 07010-3210 |
| MVC Transaction Date | 05/02/2013 | | |

MVC Signature Date: 05/02/2013

Reject ☐ English:☒ Spanish:

Reject

No Card Issued

Reject
Signature
from
Importing

| SVRS Matched Voters | | | | | | | | | | | |
|-------------------------------------|-----------|-----------|---------------|-------------------|---|-----------------|-------------------------|-----|-------------------|--------|---------------|
| Select | Voter Id | Name | Date of Birth | Registration Date | Residence Address | Mailing Address | Driver's License Number | SSN | Confidence Factor | Status | Status Reason |
| <input checked="" type="checkbox"/> | 116405562 | KO C WANG | 01/01/1800 | 12/23/1981 | 29 PEPPERMILL RD, CHATHAM TOWNSHIP, NJ 07928 | | | | 25 % | | |

* under Status Reason Indicates voter has multiple status reasons.

152626544

KAI W WANG
300 WINSTON DR Apt-Unit 312
CLIFFSIDE PARK NJ 07010

Select Add Back No Action R

Note:

If status is blank, that implies the voter status is Active.

If Confidence Factor is 100 %, that implies Driver's License Number is

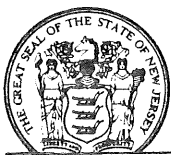
If Confidence Factor is 50 %, that implies Last Name, First Name, DOB

Last Name, First Name, First Letter of Middle Name and DOB (01/01/1800) matched statewide.

If Confidence Factor is 25 %, that implies Soundex of Last Name, Soundex of First Name, DOB (Including 01/01/1800) matched statewide.

Name matching process includes MVC previous names if there is a name change.


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New Jersey Voter Registration Application

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

| | | | | | | | | |
|--|--|---|--|------|--------------|--|-------|----------|
| 1 Check boxes that apply: <input type="checkbox"/> New Registration <input checked="" type="checkbox"/> Address Change <input type="checkbox"/> Political Party Affiliation or Non-affiliation Change <input type="checkbox"/> Name Change <input checked="" type="checkbox"/> Signature Update | | | | | | FOR OFFICIAL USE ONLY Clerk _____ Registration # 152626544 Office Time Stamp _____ | | |
| 2 Are you a U.S. Citizen? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If No, DO NOT complete this form) | | | | | | | | |
| 3 Last Name Wang First Name Kai Middle Name or Initial _____ Suffix (Jr., Sr., III) _____ | | | | | | | | |
| 4 Date of Birth _____ | | | | | | | | |
| 5 NJ Driver's License Number or MVC Non-driver ID Number _____ If you DO NOT have a NJ Driver's License or MVC Non-Driver ID, provide the last 4 digits of your Social Security Number. _____ <input type="checkbox"/> "I swear or affirm that I DO NOT have a NJ Driver's License, MVC Non-driver ID or a Social Security Number." | | | | | | | | |
| 6 Home Address (DO NOT use PO Box) | | | | Apt. | Municipality | County | State | Zip Code |
| 7 Mailing Address if different from above | | | | Apt. | Municipality | County | State | Zip Code |
| 8 Last Address Registered to Vote (DO NOT use PO Box) | | | | Apt. | Municipality | County | State | Zip Code |
| 9 Former Name if Making Name Change _____ a. Day Phone Number (Optional) _____ b. E-Mail Address (Optional) _____ | | | | | | <input type="checkbox"/> by mail <input type="checkbox"/> in person | | |
| 10 Do you wish to declare a political party affiliation? <input type="checkbox"/> Yes, the party name is _____ (Optional) <input checked="" type="checkbox"/> No, I do not wish to be affiliated with any political party. | | | | | | | | |
| 11 Gender <input type="checkbox"/> Female <input type="checkbox"/> Male | | Declaration - I swear or affirm that: <input checked="" type="checkbox"/> I am a U.S. Citizen <input checked="" type="checkbox"/> I live at the above address <input checked="" type="checkbox"/> I will be at least 18 years old on or before the next election <input checked="" type="checkbox"/> I will have resided in the State and county at least 30 days before the next election <input checked="" type="checkbox"/> I am not on parole, probation or serving a sentence due to a conviction for an indictable offense under any federal or state laws <input checked="" type="checkbox"/> I understand that any false or fraudulent registration may subject me to a fine of up to \$15,000, imprisonment up to 5 years, or both pursuant to R.S. 19:34-1 | | | | | | |
| Signature: Sign or mark and date on lines below  Date 3/1/13 | | | | | | If applicant is unable to complete this form, print the name and address of individual who completed this form. Name _____ Date _____ Address _____ | | |

Important Instructions for sections 5, 6 and 10

5) Registrants who are submitting this form by mail and are registering to vote for the first time: If you do not have any of the following information, you will be asked to provide a COPY of a current address on it to avoid having to provide identification at the time of registration.

152626544



KAI W WANG
300 WINSTON DR Apt-Unit 312
CLIFFSIDE PARK NJ 07010

used by any governmental agency. Any person who uses such facilities.

providing a contact point or the location where you spend most of

10) You may declare a political affiliation or you may declare to be unaffiliated, regardless of any prior party affiliation. Completing section 10 is OPTIONAL and will not affect the acceptance of your voter registration application.

Need More Information? Check boxes below if you would like to receive more information about:

☐ voting by mail
☐ becoming a poll worker

☐ polling place accessibility
☐ voting if you have a disability, including visual impairment

☐ available election materials in this alternative language:

For further information visit www.NJElections.org or call toll-free 1-877-NJVOTER (1-877-658-6837)

Voter Profile

User Printed: BESOEAD2
Date: 03/29/2017

Voter Information:

Voter's Name: IZABELA WDOWIAK
Date of Birth: 05/11/1984
Voter ID: 119703175
Legacy ID: J910252
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit:
Suffix A:
Suffix B:
Street Number: 15
Street Name: DAVISON ST
Address Line 2:
Address Line 3:
Municipality : GARFIELD
Postal City: GARFIELD
State: NJ
Zip: 07026

Party Information:

Current Party: Unaffiliated
Party Privilege Date:

Miscellaneous:

Gender: Not Entered
Absentee Ballot Type: None
Registration Date: 10/07/2002
Registration Type: Mail-in without Identification
Last Action Taken Date: 01/17/2012

Status Information:

Voting Privilege Date: 11/05/2002
Current Status: Deleted
Date Last Voted: 11/05/2002
Deleted Date: 01/17/2012
Deleted Reason: Administrative Action
Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Districts:

| | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|-----------------------|
| Ward | 05 | District | 01 | Congressional | 09 | Legislative 35 |
| Freeholder | | School | | Special | | Fire |

Previous Residence Addresses:

No Records Found for the Previous Residence Addresses

Election History:

| Election Date & Name | Election Type | Election Code | Ballot Type | County Voted In | Municipality Voted In | Party Affiliation | Memo | User Scanned | Date Scanned | Date Counted | Ballot Status |
|----------------------------------|---------------|---------------|-------------|-----------------|-----------------------|-------------------|------|--------------|--------------|--------------|---------------|
| 11/05/2002-GENERAL 11/05/2002 | General | 00040 | Mail-In | BERGEN | UNKNOWN | | | CONV | 01/01/2002 | 11/05/2002 | ACCEPTED |

Previous Party:

No Records Found for the Previous Party

Previous Name:

No Records Found for the Previous Name

Registration History:

No Records Found for the Registration History

Miscellaneous Memo

**BESOEAD2 /
BERGEN**

Memo :

NOT A CITIZEN

Close

Izabela Wdowiak
15 Davison St
Garfield NJ 07026

SUPERINTENDENT
OF ELECTIONS
BERGEN COUNTY, N.J.

2012 JAN 17 A 10:02

To whom it may concern:

Please remove me from the registration logs as I am not a USA citizen.
Also can you also provide me with a confirmation letter that I was removed.
My registration number is 119-703-175.

1/17/12
Wdowiak

Thank You in Advance:

119703175



IZABELA WDOIAK
15 DAVISON ST
GARFIELD NJ 07026

Izabela Wdowiak

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Voter Profile

User Printed: BESPTOGU

Date: 03/30/2017

Voter Information:

Voter's Name: IRYNA YERASHEVICH

Date of Birth: 08/09/1959

Voter ID: 522795360

Legacy ID:

Archived Legacy ID:

Residence Address:

County: BERGEN

Unit: 10A

Suffix A:

Suffix B:

Street Number: 151

Street Name: PROSPECT
AVE

Address Line 2:

Address Line 3:

Municipality : HACKENSACK

Postal City: HACKENSACK

State: NJ

Zip: 07601

Party Information:

Current Party: Unaffiliated

Party Privilege Date:

Miscellaneous:

Gender: Not Entered

Absentee Ballot Type: None

Registration Date: 05/21/2015

Registration Type: Agency with
Identification

Last Action Taken Date: 06/15/2015

Status Information:

Voting Privilege Date:

Current Status: Rejected

Date Last Voted:

Rejected Reason: Not a U.S Citizen/Checked off No to
U.S. Citizenship

Poll Worker Status:

Mailing Address:

Street Number:

Suffix A:

Suffix B:

Street Name/P.O. Box:

Unit:

Address Line 2:

Address Line 3:

City:

State:

Zip Code:

Country:

Inactive Confirmation Address:

Street Number:

Suffix A:

Suffix B:

Street Name/P.O. Box:

Unit:

Address Line 2:

Address Line 3:

City:

State:

Zip Code:

Country:

Districts:

| | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|-----------------------|
| Ward | 04 | District | 01 | Congressional | 05 | Legislative 37 |
| Freeholder | | School | | Special | | Fire |

Previous Residence Addresses:

| Change Date | Street Number | Street Name | Address Line 2 | Address Line 3 | Unit | Municipality | State | Zip Code |
|-------------|---------------|--------------------------|----------------|----------------|------|--------------|------------|----------|
| 06/15/2015 | | 51 GARDEN STREET APT 808 | | | | HOBOKEN | New Jersey | 07030 |

Election History:

No Records Found for the Election History

Previous Party:

No Records Found for the Previous Party

Previous Name:

No Records Found for the Previous Name

Registration History:

No Records Found for the Registration History

Yes No

Main Menu

Activities

Voter Registration

Add/Change vote
voter With No DOB
voter Address Change
Confirmation
MVC - Agency
MVC (the Online Voter)

Resident Voter History

1 - 10 items

Batch

Batch Selection

Messaging

My Elector

My Elector

My Elector

My Elector

My Elector

Compare MVC - Agency

Incomp NS 6/15/15A

BESPTOGU / B

| MVC Voter | | | |
|-------------------------|--|----------------------------------|---|
| Name | IRYNA YERASHEVICH | Date of Birth | 08/09/1959 |
| Residence Address | 151 PROSPECT AVE APT 10A HACKENSACK NJ 07601-2215 | Mailing Address | |
| Driver's License Number | Y26473700058592 | Original Driver's License Number | Y26473700058592 |
| Card Number | | Previous DOB | 08/09/1959 |
| Previous Name | IRYNA YERASHEVICH | Previous Address | 51 GARDEN STREET APT 808 HOBOKEN NJ 07030-3531 |
| MVC Transaction Date | 05/21/2015 | | |

MVC Signature Date: 05/21/2015

Reject ☐ English:

☒ Spanish:

Reject

No Card Issued

| SVRS Matched Voters | | | | | | | | | | |
|--|----------|------|---------------|-------------------|-------------------|-----------------|-------------------------|-----|-------------------|------|
| Select | Voter Id | Name | Date of Birth | Registration Date | Residence Address | Mailing Address | Driver's License Number | SSN | Confidence Factor | Stat |
| No Matching records Found. You can either choose to take No Action, Add or Reject this Motor Voter by clicking on the buttons. | | | | | | | | | | |

* under Status Reason indicates voter has multiple status reasons.

522795360



IRYNA YERASHEVICH
151 PROSPECT AVE Apt-Unit 10A
HACKENSACK NJ 07601

not statewide.

matched statewide.


First Name, DOB (including 01/01/1800) matched statewide.
age.



New Jersey Voter Registration Application

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

Kathy

| | | | | | | |
|---|--|--|--------------|--|-------|--|
| 1 Check boxes that apply: <input type="checkbox"/> New Registration <input checked="" type="checkbox"/> Address Change <input type="checkbox"/> Political Party Affiliation or Non-affiliation Change <input checked="" type="checkbox"/> Name Change <input checked="" type="checkbox"/> Signature Update | | | | | | FOR OFFICIAL USE ONLY Clerk 522795360 Registration # Office Time Stamp |
| 2 Are you a U.S. Citizen? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If No, DO NOT complete this form) | | Will you be 18 years of age by the next election? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If No, DO NOT complete this form) | | | | |
| 3 Last Name YERASHEVICH | | First Name IRYNA | | Middle Name or Initial Suffix (Jr., Sr., III) | | |
| 4 Date of Birth 08/09/1959 | | | | | | |
| 5 NJ Driver's License Number or MVC Non-driver ID Number X2647 37000 58 592 <input type="checkbox"/> I swear or affirm that I DO NOT have a NJ Driver's License, MVC Non-driver ID or a Social Security Number. | | | | | | If you DO NOT have a NJ Driver's License or MVC Non-Driver ID, provide the last 4 digits of your Social Security Number. |
| 6 Home Address (DO NOT use PO Box) | | Apt. | Municipality | County | State | |
| 7 Mailing Address if different from above 151 Prospect Ave Hackensack | | Apt. | Municipality | County | State | |
| 8 Last Address Registered to Vote (DO NOT use PO Box) | | Apt. | Municipality | County | State | |
| 9 Former Name if Making Name Change | | | | | | a. Day Phone Number (Optional) b. E-Mail Address (Optional) |
| 10 Do you wish to declare a political party affiliation? (Optional) <input type="checkbox"/> Yes, the party name is _____ <input checked="" type="checkbox"/> No, I do not wish to be affiliated with any political party. | | | | | | If applicant is unable to complete this form, print the name and address of individual who completed this form. Name _____ Date _____ Address _____ |
| 11 Gender <input type="checkbox"/> Female <input checked="" type="checkbox"/> Male | | Declaration - I swear or affirm that: <input checked="" type="checkbox"/> I am a U.S. Citizen <input checked="" type="checkbox"/> I live at the above address <input checked="" type="checkbox"/> I will be at least 18 years old on or before the next election | | | | |
| | | <input checked="" type="checkbox"/> I will have resided in the State and county at least 30 days before the next election <input checked="" type="checkbox"/> I am not on parole, probation or serving a sentence due to a conviction for an indictable offense under any federal or state laws | | | | |
| | | <input checked="" type="checkbox"/> I understand that any false or fraudulent registration may subject me to a fine of up to \$15,000, imprisonment up to 5 years, or both pursuant to N.J.S. 17:27-1 | | | | |
| Signature: Sign or mark and date on lines below  Date 06/22/15 | | | | | | If applicant is unable to complete this form, print the name and address of individual who completed this form. Name _____ Date _____ Address _____ |

Important Instructions for sections 5, 6 and 10

5. Residents who are submitting this form by mail and are registering to vote for the first time: If you do not have any of the following information, you will be asked to provide a COPY of a current address on it to avoid having to provide identification at the time of registration:

522795360



IRYNA YERASHEVICH
151 PROSPECT AVE Apt-Unit 10A
HACKENSACK NJ 07601

used by any governmental agency. Any person who uses such facilities.

providing a contact point or the location where you spend most of

to be unaffiliated, regardless of any prior party affiliation. Completing section 10 is OPTIONAL and will not affect the acceptance of your voter registration application.

Need More Information? Check boxes below if you would like to receive more information about:

- | | | |
|---|---|---|
| <input type="checkbox"/> voting by mail | <input type="checkbox"/> polling place accessibility | <input type="checkbox"/> available election materials in this alternative language: |
| <input type="checkbox"/> becoming a poll worker | <input type="checkbox"/> voting if you have a disability, including visual impairment | |

For further information visit www.NJElections.org or call toll-free 1-877-NJVOTER (1-877-658-6837)

Voter Profile

User Printed: BESPTOGU
Date: 03/30/2017

Voter Information:

Voter's Name: YOUNGOK O YOU
Date of Birth: 12/10/1961
Voter ID: 524762619
Legacy ID:
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit:
Suffix A:
Suffix B:
Street Number: 263
Street Name: WEDGEWOOD DR
Address Line 2:
Address Line 3:
Municipality : PARAMUS
Postal City: PARAMUS
State: NJ
Zip: 07652

Party Information:

Current Party: Unaffiliated
Party Privilege Date:

Miscellaneous:

Gender: Not Entered
Absentee Ballot Type: None
Registration Date: 10/15/2015
Registration Type: Agency with Identification
Last Action Taken Date: 11/30/2015

Status Information:

Voting Privilege Date:
Current Status: Rejected
Date Last Voted:
Rejected Reason: Not a U.S Citizen/Checked off No to U.S. Citizenship
Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Districts:

| | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|-----------------------|
| Ward | 00 | District | 07 | Congressional | 05 | Legislative 38 |
| Freeholder | | School | | Special | | Fire |

Previous Residence Addresses:

| Change Date | Street Number | Street Name | Address Line 2 | Address Line 3 | Unit | Municipality | State | Zip Code |
|-------------|---------------|------------------|----------------|----------------|------|--------------|------------|----------|
| 11/30/2015 | | 263 WEDGEWOOD DR | | | | PARAMUS | New Jersey | 07652 |

Election History:

No Records Found for the Election History

Previous Party:

No Records Found for the Previous Party

Previous Name:

No Records Found for the Previous Name

Registration History:

No Records Found for the Registration History

Main Menu:

Activities

Voter Registration

Add/Change Voter

Voter With No DOB

Voter Address Change

Confirmation

MVC - Agency

MVC File Online Voter

Maintain Voter History

Elections

System

Batch Scanning

MVC DL Search

Inquiries

Help

Logout

Compare MVC - Agency

I pcomp 10/5 BESPTGV / B 11/30/15

| MVC Voter | | | |
|-------------------------|---|----------------------------------|---|
| Name | YOUNGOK O YOU | Date of Birth | 12/10/1961 |
| Residence Address | 263 WEDGEWOOD DR PARAMUS NJ 07652-3318 | Mailing Address | |
| Driver's License Number | Y6789790062612 | Original Driver's License Number | Y67897907662612 |
| Card Number | | Previous DOB | 12/10/1961 |
| Previous Name | YOUNG O YOU | Previous Address | 263 WEDGEWOOD DR PARAMUS NJ 07652-3318 |
| MVC Transaction Date | 10/15/2015 | | |

MVC Signature Date: 10/15/2015

Reject ☐ English:☐ Spanish:

Reject

No Card Issued

| SVRS Matched Voters | | | | | | | | | | |
|---|----------|------|---------------|-------------------|-------------------|-----------------|-------------------------|-----|-------------------|------|
| Select | Voter Id | Name | Date of Birth | Registration Date | Residence Address | Mailing Address | Driver's License Number | SSN | Confidence Factor | Stat |
| No Matching records Found. You can either choose to take No Action, Add or Reject this Motor Voter by clicking on the reject buttons. | | | | | | | | | | |

* under Status Reason indicates voter has multiple status reasons.

Duplicate

Print List

Display Signature

524762619



YOUNGOK O YOU
263 WEDGEWOOD DR
PARAMUS NJ 07652

atched statewide.

r)

0) matched statewide.

x of First Name, DOB (Including 01/01/1800) matched statewide. change.



New Jersey Voter Registration Application

NOT A US CITIZEN

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

Attn: Kathy/MVC

FOR OFFICIAL
USE ONLY

1 Check boxes that apply: ☐ New Registration ☐ Address Change ☐ Political Party Affiliation ☐ Name Change ☒ Signature Update or Non-affiliation Change

2 Are you a U.S. Citizen? ☐ Yes ☒ No (If No, DO NOT complete this form) Will you be 18 years of age by the next election? ☐ Yes ☒ No (If No, DO NOT complete this form)

3 Last Name: YOU First Name: Young Middle Name or Initial: OK Suffix (Jr., Sr., III):

4 Date of Birth: 12/10/1961

5 NJ Driver's License Number or MVC Non-driver ID Number: Y6789 79000 62612 If you DO NOT have a NJ Driver's License or MVC Non-Driver ID, provide the last 4 digits of your Social Security Number.

☐ "I swear or affirm that I DO NOT have a NJ Driver's License, MVC Non-driver ID or a Social Security Number"

6 Home Address (DO NOT use PO Box): 263 Wedgewood Dr. Apt. Municipality County State Zip Code NJ 07652

7 Mailing Address if different from above Apt. Municipality County State Zip Code

8 Last Address Registered to Vote (DO NOT use PO Box) Apt. Municipality County State Zip Code

☐ by mail
☐ in person

9 Former Name if Making Name Change a. Day Phone Number (Optional) b. E-Mail Address (Optional)

10 Do you wish to declare a political party affiliation? ☐ Yes, the party name is (Optional) ☒ No, I do not wish to be affiliated with any political party.

11 Gender: ☒ Female ☐ Male Declaration - I swear or affirm that:

- I am a U.S. Citizen
- I live at the above address
- I will be at least 18 years old on or before the next election

- I will have resided in the State and county at least 30 days before the next election
- I am not on parole, probation or serving a sentence due to a conviction for an indictable offense under any federal or state laws

- I understand that any false or fraudulent registration may subject me to a fine of up to \$15,000, imprisonment up to 5 years, or both pursuant to R.S. 19:34-1

Signature: Sign or mark and date on lines below Date: 12/04/15 If applicant is unable to complete this form, print the name and address of individual who completed this form. Name Date Address

Important Instructions for sections 5, 6 and 10

5) 524762619
YOUNG OK YOU
263 WEDGEWOOD DR
PARAMUS NJ 07652

ing to vote for the first time: If you do not have any of the information verified, you will be asked to provide a COPY of a current and valid ID to avoid having to provide identification at the polling place. any governmental agency. Any person who uses such numbers

6) contact point or the location where you spend most of your time.
10) be unaffiliated, regardless of any prior party affiliation. If you are a previously affiliated voter who wants to change political party affiliation or become unaffiliated, you must file this form no later than 55 days before the primary election in order to vote in the primary election. Completing section 10 is OPTIONAL and will not affect the acceptance of your voter registration application.

Need More Information? Check boxes below if you would like to receive more information about:

☐ voting by mail ☐ polling place accessibility ☐ available election materials in this alternative language:
☐ becoming a poll worker ☐ voting if you have a disability, including visual impairment

For further information visit Elections.NJ.gov or call toll-free 1-877-NJVOTER (1-877-658-6837)

Voter Profile

User Printed: BESOEAD2
Date: 03/30/2017

Voter Information:

Voter's Name: OMER YUSUFOGLU
Date of Birth: 10/20/1981
Voter ID: 152793236
Legacy ID:
Archived Legacy ID:

Residence Address:

County: BERGEN
Unit: B8
Suffix A:
Suffix B:
Street Number: 151
Street Name: ENGLE ST
Address Line 2:
Address Line 3:
Municipality : ENGLEWOOD
Postal City: ENGLEWOOD
State: NJ
Zip: 07631

Party Information:

Current Party: Unaffiliated
Party Privilege Date:

Miscellaneous:

Gender: Male
Absentee Ballot Type: None
Registration Date: 10/05/2013
Registration Type: Agency with Identification
Last Action Taken Date: 06/23/2014

Status Information:

Voting Privilege Date:

Current Status: Rejected

Date Last Voted:

Rejected Reason: Not a U.S Citizen/Checked off No to U.S. Citizenship

Poll Worker Status:

Mailing Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Inactive Confirmation Address:

Street Number:
Suffix A:
Suffix B:
Street Name/P.O. Box:
Unit:
Address Line 2:
Address Line 3:
City:
State:
Zip Code:
Country:

Districts:

| | | | | | | | |
|-------------------|----|-----------------|----|----------------------|----|--------------------|----|
| Ward | 01 | District | 01 | Congressional | 09 | Legislative | 37 |
| Freeholder | | School | | Special | | Fire | |

Previous Residence Addresses:

| Change Date | Street Number | Street Name | Address Line 2 | Address Line 3 | Unit | Municipality | State | Zip Code |
|-------------|---------------|-------------------------|----------------|----------------|------|--------------|------------|----------|
| 06/23/2014 | | 134 SHAW STREET APT # 2 | | | | GARFIELD | New Jersey | 07026 |

Election History:

No Records Found for the Election History

Previous Party:

No Records Found for the Previous Party

Previous Name:

No Records Found for the Previous Name

Registration History:

No Records Found for the Registration History

Name
Polling Place

Name
ENGLEWOOD PUBLIC LIBRARY MACKAY
ROOM

Address
31 ENGLE ST
ENGLEWOOD 07631

Memo:

Record sent from MVC in error. Voter is not a
citizen. Corrected 6/30/14. See additional
paperwork in AX- 08/18/2014, BESOEAD2
MVC AGENCY
MVC TRANSACTION DATE - 10/05/2013, BESOEAD2

[Previous](#)

STATE Admin Message --> Have a nice day.

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152793236



OMER YUSUFOGLU
151 ENGLE ST Apt-Unit B8
ENGLEWOOD NJ 07631

Motor Voter - Agency

Main Menu:

Activities

Voter Registration

Add/Change Voter
 Voter With No DOB
 Voter Address Change
 Confirmation
 Voter Address Change
 Confirmation Export
MVC - Agency
 MVC File Online Voter
 Voters who have
 Verification / Postal Notice
 Verif. and Ack. Card Export
 MVC Manual Update

Maintain Voter History

Maintain County Data

Elections

System

Poll Book Printing Schedule

Duplicate Voters

Batch Scanning

Messaging

MVC DL Search

Backend Reporting

Document Imaging

Handheld Scanning

Inquiries

Reports

Help

Logout

Compare MVC - Agency

BESOEAD2 / BERGEN

El Batty (NS)

| MVC Voter | | | |
|-------------------------|--|----------------------------------|---|
| Name | OMER YUSUFOGLU | Date of Birth | 10/20/1981 |
| Residence Address | 151 ENGLE ST APT B8 ENGLEWOOD NJ 07631-2513 | Mailing Address | |
| Driver's License Number | Y94666050010815 | Original Driver's License Number | Y94666050010815 |
| Card Number | | Previous DOB | 10/20/1981 |
| Previous Name | OMER YUSUFOGLU | Previous Address | 134 SHAW STREET APT # 2 GARFIELD NJ 07026-2176 |
| MVC Transaction Date | 10/05/2013 | | |

MVC Signature Date: 10/05/2013

Reject ☐ English:☒ Spanish:

Reject

No Card IssuedReject
Signature
from
Importing

| SVRS Matched Voters | | | | | | | | | | | |
|---|----------|------|---------------|-------------------|-------------------|-----------------|-------------------------|-----|-------------------|--------|---------------|
| Select | Voter Id | Name | Date of Birth | Registration Date | Residence Address | Mailing Address | Driver's License Number | SSN | Confidence Factor | Status | Status Reason |
| No Matching records Found. You can either choose to take No Action, Add or Reject this Motor Voter by clicking on the respective buttons. | | | | | | | | | | | |

* under Status Reason indicates voter has multiple status reasons.

Note:

If status is blank, that implies the voter status is Active.

If Confidence Factor is 100 %, that implies Driver's License Number

If Confidence Factor is 50 %, that implies Last Name, First Name, D

Last Name, First Name, First Letter of Middle Name and DOB (01/01

If Confidence Factor is 25 %, that implies Soundex of Last Name, S

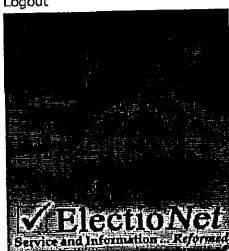
Name matching process includes MVC previous names if there is a n

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152793236



OMER YUSUFOGLU
 151 ENGLE ST Apt-Unit B8
 ENGLEWOOD NJ 07631



Not Cit 6.30.14

152793236



OMER YUSUFOGLU
151 ENGLE ST Apt-Unit B8
ENGLEWOOD NJ 07631

06/30/2014

TO WHOM IT MAY CONCERN

Dear Madam/Sir

I received a letter from your office asking me to complete a voter registration form however I m Not a US citizen .There must have been a mistake because I m not a US CITIZEN and I m not supposed to register or vote in US. Elections. Please remove me from the list immediately. I would also like to get a letter mailed stating that I have been removed.

Best regards

Omer Yusufoglu

151 Engle street #b8

Englewood New Jersey 07631

Ph : 201.888.8886



SUPERINTENDENT
OF ELECTIONS
BERGEN COUNTY, N.J.
2014 JUN 30 AM 11 37

ENG

6/30/2014

Omer Yusufoglu 201-888-8886 cell

He would like an appointment to see the Superintendent of Elections, Patricia DiCostanzo.

Not a US Citizen

MVC - Agency electronic application (no signature)

*Letter & Voter
Profile sent
showing deleted
8/19/14 status.
Kathy*

152793236



OMER YUSUFOGLU
151 ENGLE ST Apt-Unit B8
ENGLEWOOD NJ 07631

PATRICIA DICOSTANZO
BERGEN COUNTY
SUPERINTENDENT OF ELECTIONS
1 BERGEN COUNTY PLAZA ROOM 380
HACKENSACK NJ 07601
PHONE: 201-336-6100
FAX: 201-336-6111

06/23/2014

Voter ID# 152793236



OMER YUSUFOGLU
151 ENGLE ST Apt-Unit B8
ENGLEWOOD NJ 07631

Dear Omer,

This office is in receipt of your voter registration application. It cannot be completely processed for the following reason(s).

- You checked off "NO" regarding U.S. citizenship; Citizenship is a requirement to register to vote.

If you have any questions feel free to contact our office.

Thank you for your help in resolving this matter.

Sincerely Yours,

PATRICIA DICOSTANZO
SUPERINTENDENT OF ELECTIONS



PATRICIA DI COSTANZO
SUPERINTENDENT OF ELECTIONS
COMMISSIONER OF REGISTRATION

BERGEN COUNTY
SUPERINTENDENT OF ELECTIONS
ONE BERGEN COUNTY PLAZA, ROOM 380
HACKENSACK, N. J. 07601
PHONE: (201) 336-6100
FAX: (201) 336-6111

THERESA M. O'CONNOR
DEPUTY SUPERINTENDENT OF ELECTIONS
DEPUTY COMMISSIONER OF REGISTRATION

Dear Mr. Yusufoglu;

Enclosed please find your Voter Profile, which shows that you have been removed/rejected for Non-Citizenship. If you have any questions, please don't hesitate to contact this office.

Sincerely,

Patricia DiCostanzo

Superintendent of Elections

152793236



OMER YUSUFOGLU
151 ENGLE ST Apt-Unit B8
ENGLEWOOD NJ 07631