

COMMISSIONER OF REGISTRATION

SUPERINTENDENT OF ELECTIONS

COUNTY OF ESSEX

Hall of Records - Room 417 - Newark, New Jersey 07102 (973) 621-6464 Fax (973) 621-5061 Tel.



Carmine P. Casciano Commissioner of Registration Superintendent of Elections

09/16/2009 Voter ID# 151220179

Kathy V. Sumter Edwards Deputy Commissioner of Registration Deputy Superintendent of Elections

FIONA J WEBSTER 15 KENDAL AVE MAPLEWOOD NJ 07040



Dear Fiona,

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

(If your signature is missing,

Please provide the missing information and sign this form in the space provided, and return to this office.

Thank you for your attention on this matter.

Sincerely Yours,

armine P. Casciani

Superintendent of Elections

Please remove me from your records.

I have a "permanent resident card" but

I am not a U.S. citizen. Therefore I camnot vote.



COMMISSIONER OF REGISTRATION

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Carmine P. Casciano Commissioner of Registration Superintendent of Elections

HUGO SOUFFRANT

ORANGE NJ 07050

210 CENTRAL AVE Apt-Unit 3C

Kathy V. Sumter Edwards Deputy Commissioner of Registration Deputy Superintendent of Elections

04/09/2009

Voter ID# 151127826



Dear Hugo,

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

• (If your signature is missing, you must complete a new form, which is enclosed)

Southant 4/22/09

Please provide the missing information and sign this form in the space provided, and return to this office.

Thank you for your attention on this matter.

Sincerely Yours,

I am Not a U.S Citizen. Commine P. Casciano Glease remouve me from Voting registry.



Voter Profile

User Printed: ESSPAT Date: 03/10/2009

Voter Information:

Voter's Name: VASLEY S SAINT JUSTE

Date of Birth: 01/31/1979 151006026

Voter ID: Legacy ID:

Archived Legacy ID:

Residence Address: County: ESSEX

Unit:

Suffix A: Suffix B:

Street Number: 34

Street Name: GIRARD AVE

Address Line 2: Address Line 3:

Municipality: EAST ORANGE

Postal City: EAST ORANGE

State: NJ Zip: 07017 Miscellaneous:

Party Information:

Current Party: Democratic*

Party Privilege Date: 11/04/2008

Gender: Not Entered Absentee Ballot Type: None Registration Date: 10/14/2008

Registration Type: Third Party with Identification

Last Action Taken Date: 01/07/2009

Status Information:

Voting Privilege Date: 11/04/2008

Current Status: Active

Date Last Voted: 11/04/2008

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 Freeholder

01 5.003

District School

03

Congressional Regional School 10

Legislative 34

Fire

Previous Residence Addresses:

No Records Found for the Previous Residence Addresses

Election History:

Election Date Election Type Election

Code

Ballot Type

County Municipality Party Voted Voted In

User Affiliation Scanned Scanned

Date

Counted

Ballot Status

11/04/2008-GENERAL

& Name

ELECTION

General

00004

Machine ESSEX

EAST ORANGE ESSSHIRL 01/07/2009 11/04/2008

Previous Party:

No Records Found for the Previous Party

Registration History:

No Records Found for the Registration History

Please Remove me from the Voting Registry I'm not a U.S. Citizen.



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SUPERINTENDENT OF ELECTIONS

COUNTY OF ESSEX

Hall of Records - Room 417 - Newark, New Jersey 07102 (973) 621-5061 Tel. (973) 621-6464 Fax



Kathy V. Sumter Edwards

Carmine P. Casciano Commissioner of Registration Superintendent of Elections

Deleted actual Deputy Commissioner of Registratio Deputy Superintendent of Elections 09/22/2009

CARLA L REPOLLET 1 BLAIR RD NUTLEY NJ 07110

Voter ID# 151224207



Dear Carla,

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

	/	** *
Voter Signature	Date	

Please provide the missing information and sign this form in the space provided, and return to this office.

Thank you for your attention on this matter.

Sincerely Yours,

This must be a fraud! Superintendent of Elections

I am not a U.S. Citizen; Herefore, I would have not applied for voter registration

Voter Profile

Voter Information:

Voter's Name: JAVIER RIVERA 3RD Date of Birth: 10/20/1963

Voter ID: Legacy ID: C539250

101381749

Archived Legacy ID:

Residence Address:

County: ESSEX

Unit: Suffix A: Suffix B:

Street Number: 50

Street Name: MELROSE DR

Address Line 2: Address Line 3:

Municipality: LIVINGSTON

Postal City: LIVINGSTON

State: NJ Zip: 07039 Miscellaneous:

Party Information:

Party Privilege Date:

Current Party: Democratic*

Gender: Not Entered Absentee Ballot Type: None Registration Date: 03/28/1996

Registration Type: In-Person with Identification

Last Action Taken Date:

Status Information:

Voting Privilege Date: 04/26/1996

Current Status: Active Date Last Voted: 11/06/2001 Poll Worker Status: No

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 Freeholder 00 5.004 District School

07

Congressional Regional School

Legislative 27

Previous Residence Addresses:

No Records Found for the Previous Residence Addresses

Election History:

Ballot **County Municipality Party** Date Election Date Election Type Election Ballot User Date Voted Voted In **Affiliation Scanned Scanned** Counted Status & Name Code Type 11/06/2001-ESSEX UNKNOWN CONV 11/06/2001 11/06/2001 General 00040 Machine GENERAL 11/06/2001 11/07/2000-Machine ESSEX UNKNOWN CONV 11/07/2000 11/07/2000 General 00040 **GENERAL** 11/07/2000

Previous Party:

No Records Found for the Previous Party

Registration History:

No Records Found for the Registration History

PLEASE REDUCE MY NAME, FROM THE VOTING REGISTRY;

NY NAME MEVER FUCULDED THE "3FD"

PLEASE REMOVE THE 3ED

User Printed: ESSPAT Date: 03/05/2009

Voter Profile



User Printed: ESSLUZ Date: 05/07/2009

Voter Information:

Voter's Name: ALTHEA M RUSSELL Date of Birth: 10/31/1969

Voter ID:

101517723

Legacy ID: C685310 Archived Legacy ID:

Status Information:

Current Status: Active

Poll Worker Status: No

Voting Privilege Date: 09/19/2001

Date Last Voted: 11/08/2005

Residence Address:

County: ESSEX

Unit: Suffix A: Suffix B:

Street Number: 3

Street Name: CHESTNUT HILL PL

Address Line 2: Address Line 3:

Municipality: GLEN RIDGE Postal City: GLEN RIDGE

State: NJ Zip: 07028

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:

Party Information:

Current Party: Democratic* Party Privilege Date:

Miscellaneous:

Gender: Not Entered Absentee Ballot Type: None Registration Date: 08/21/2001

Registration Type: In-Person with Identification

Last Action Taken Date: 12/27/2006

Inactive Confirmation Address:

Street Number: Suffix A:

Suffix B:

Street Name/P.O. Box

Address Line 2: Address Line 3:

City: State: Zip Code: Country:

Districts:

Ward Freeholder

5.005

00

District School

07

Congressional Regional School

08

Legislative 34

Fire

Election History:

Election Date & Name	Election Type	Election Code	Ballot Type	County Voted In	Municipality Voted In	Party Affiliation	User Scanned	Date Scanned	Date Counted	Ballot Status
11/08/2005- GENERAL 11/08/2005	General	00040	Machine	ESSEX	GLEN RIDGE		ESSANA	12/27/2006	11/08/2005	
11/02/2004- GENERAL 11/02/2004	General	00040	Machine	ESSEX	UNKNOWN		CONV	11/02/2004	11/02/2004	
06/08/2004- PRIMARY 06/08/2004	Primary	00040	Machine	ESSEX	UNKNOWN	Unaffiliated	CONV	06/08/2004	06/08/2004	
11/05/2002- GENERAL 11/05/2002	General	00040	Machine	ESSEX	UNKNOWN		CONV	11/05/2002	11/05/2002	
04/16/2002- Annual School 2	Annual School	00001	Machine	ESSEX	UNKNOWN		CONV	03/21/2008	04/16/2002	
11/06/2001- GENERAL 11/06/2001	General	00040	Machine	ESSEX	UNKNOWN		CONV	11/06/2001	11/06/2001	

Registration History:

No Records Found for the Registration History

Please remove me from voter Record Not a U.S. citizen.



New Jersey Voter Registration Application Please print clearly in ink. All information is required unless marked optional

oxes New Registration y: J Name Change		dress Change nature Update	J Political Party	Affiliation	FOR OFFICE
NOT complete this form)	Will	you be 18 years of age	by the next election?	TYes ⊭ i No	USE ONL Clerk
	TOAN			al Suffix (Jr. Sr III)	Registration #
	ID No embor		~ ·		Office Time Star
		. 10 provide the last 4 d	lights of your Social Sociates		
minimum and DO NOT have a NJ D	river's Lice	nse, MVC Non-driver	ID or a Social Security	Number.*	
F Clinton St Edjary	Apt	Municipality	County	State Zip Code	-
	Apt	Municipality	County	State Zip Code	
	Apt	Municipality	County	State Zip Code	☐ by mail
	i	Day (Or	y Phone Number		'Lin person
to declare a political party aff	filiation?	☐ Yes, the party	name is		× 3
Declaration				with any political pa	irty.
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	at • I a se of	am not on parole, proba entence due to a convi	the next election ation or serving a	fraudulent registr me to a fine of up imprisonment up	ation may subject to \$15,000,
r mark and date on lines belo	w	If applie	cant is unable to co	omplete this form of	rint the
		Name		Date	·
		Address	3		
11 .		4			
	J.S. Citizen? - L Yes - No NOT complete this form) The Fig. J. S. Citizen? - L Yes - No NOT complete this form) J. S. Citizen? J. S. Citizen J. Wear or affirm the above address J. Will be at least 18 years old on or before the next election	J Sig J S. Citizen? Lyes No Will J S. Citizen? Lyes No Will J NOT complete this form) (If N Ine First Name First Name JOH N JO	J S. Citizen? Yes No Will you be 18 years of age (If No, DO NOT complete this form) Description of the provided the last 40 will you be 18 years of age (If No, DO NOT complete this form) Description of the last 40 will you be 18 years of age (If No, DO NOT complete this form) Description of the last 40 will you be 18 years of age (If No, DO NOT complete this form) Description of the last 40 will you be 18 years of age (If No, DO NOT complete this form) Description of the last 40 will you be 18 years of age (If No, DO NOT complete this form) Description of the last 40 will you be 18 years of age (If No, DO NOT complete this form) If you DO NOT have a NJ Driver's License, MVC Non-driver applied to provide the last 40 will not painty Description of the last 40 will not painty affiliation? Description of the last 18 years old on or before the next election Description of the last 18 years old on or before the next election Description of the last 18 years old on or before the next election Description of the last 18 years old on or before the next election Description of the last 18 years old on or before the next election Description of the last 18 years old on or before the next election Description of the last 18 years old on or before the next election Description of the last 18 years old on or before the next election Description of the last 18 years old on or before the next election Description of the last 18 years old on or before the next election Description of the last 18 years old on or before the next election Description of the last 18 years old on or before the next election Description of the last 18 years old on or before the next election Description of the last 18 years old on the last 18 years old on or before the next election Description of the last 18 years old on the last	J S. Citizen? Lyes No J NOT complete this form) Will you be 18 years of age by the next election? (If No, DO NOT complete this form) First Name First Name Middle Name or Initial JOA N JOA N JOA POWD NOT have a NJ Driver's License. MVC Non-driver ID or a Social Security County PSSOC Non-driver ID or a Social Security PSSOC Non-driver ID or a Social Security	J Signature Update or Non-affiliation Change J Signature Update or Non-affiliation Change J Signature Update or Non-affiliation Change Will you be 18 years of age by the next election? Tyes if No (If No, DO NOT complete this form) Will you be 18 years of age by the next election? Will you be 18 years of age by the next election? Tyes if No (If No, DO NOT complete this form) Middle Name or Initial Suffix (ur. Sr. III) Suffix (ur. Sr. III) Middle Name or Initial Suffix (ur. Sr. III) Provide the last 4 digits of your Social Security Number. If you 00 NOT have a NJ Driver's Licensee MVC Non-driver ID or a Social Security Number. Apt. Municipality County State Zip Code Will you be 18 years of age by the next election? If you 00 NOT complete this form) Middle Name or Initial Suffix (ur. Sr. III) Suffix (ur. Sr. III) Municipality County State Zip Code Day Phone Number (Optional) Tyes, the party name is I No, I do not wish to be affiliated with any political party at least 30 days before the next election I will have resided in the State and county at least 30 days before the next election I will have resided in the State and county at least 30 days before the next election I will have resided in the State and county at least 30 days before the next election I will have resided in the State and county at least 30 days before the next election I will have resided in the State and county at least 30 days before the next election I will have resided in the State and county at least 30 days before the next election I will be all least 18 years old of the party name is a limit to a fine of unimprisonment up or both pursuant If applicant is unable to complete this form, p name and address of individual who complete



COMMISSIONER OF REGISTRATION

SUPERINTENDENT OF ELECTIONS COUNTY OF ESSEX

Hall of Records - Room 417 - Newark, New Jersey 07102 (973) 621-5061 Tel. (973) 621-6464 Fax



SEE NOTE BELOW. YOU! Kathy V. Sumter
Acting/Commissioner of Registration
Acting/Superintendent of Elections

ERIC K HARSE-LEDEZMA 512 BLOOMFIELD AVE Apt-Unit 9-L CALDWELL NJ 07006

Dear Eric,

ERIC K HARSE-LEDEZMA 512 BLOOMFIELD AVE Apt-Unit 9-L

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

Your Voter Registration Application was not signed.

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.

PLEASE REMOVE ME FROM X YOUR RECORDS AS I AM NOT S

Sincerely Yours,

A U.S. CITIZEN.

THANK YOU,

KATHY V. SUMTER
DEPUTY SUPERINTENDENT OF

LECTIONS

Putting Essex County First

ESSEX COUNTY IS AN EQUAL OPPORTUNITY EMPLOYER



New Jersey No US. CITIZEN — Voter Registration Application

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

1	Check bo	/ :	☐ New Registrate ☐ Name Change	9		ess Change ature Updat		☐ Political Pa or Non-affi				FOR OFFICIAL USE ONLY
	(If No, DO	NOT	izen? Yes No complete this for	m)	Will yo	ou be 18 years	of age	e by the next elec	ction?	_		Clerk
3 1	R05	e A			Name AM			liddle Name o		Suffix	(Jr., Sr., III)	Registration #
4 [Date of Birt	:h	Month	_ Day	Y	′ear						Office Time Stamp
	7.411.18		Number or MVC Non that I DO NOT have	12	162	ID, provide the	he last 4	NJ Driver's License or digits of your Social Se	ecurity Numb	er.		1111
6	Home Add	ress (DO NOT use PO Box	()	Apt.	Municipali		County		State	Zip Code	45-m4.
7 ^	Mailing Add	dress i	if different from ab	ove	Apt.	Municipali	ty	County	′	State	Zip Code	3
			ered to Vote (DONOT us	5	Apt.	Municipali	ty	County	,	State	Zip Code	⊐ by mail ⊐ in person
	S 187	74	Making Name Cha		<u> </u>			ay Phone Nun Optional)	nber			percen
10 [Oo you wis O <i>ptional)</i>	h to d	eclare a political p	arty affil	iation?	☐ Yes, th☐ No. I do	e par o not	ty name is wish to be aff	iliated v	vith an	v political p	Orth.
	Gender Female Male	• l ai	aration - I swear or m a U.S. Citizen ve at the above addre ill be at least 18 year or before the next el	ess s old	• I	will have resi at least 30 day am not on par sentence due to	ded in s beforole, pro o a co	the State and core the next electrope obation or serving niction for an incideral or state law	ounty tion g a dictable	l u fra me im	understand the nudulent regis to a fine of a prisonment up	at any false or tration may subject up to \$15,000.
Signa	ature: Sigr	or ma	ark and date on lir	nes belo	W		If ap	plicant is unat e and address	ble to co	mplete	e this form.	print the
X			9/2011		101			ne			Da	te'
Date	10/14	/1.	_									

Ne Pi

New Jersey Provisional Ballot Affirmation Statement

_	
1	Reason for Provisional Ballot (Check one) Moved within the county after registering without notifying election office
	Registration information missing from poll book Municipality/Ward/District:
	☐ Did not show required ID
	☐ Poll book indicates you are a Mail-In Ballot voter, but did not apply for, receive,
	or return such ballot
2	I am a US citizen ☐ Yes No 3 I am 18 or older ☐ Yes ☐ No
4	Current Name
	Last First MI. Suffix
	If your name was changed after registering to vote, provide your former name
	Former Name
	Signature of Former Name
5	Current Home Address 800 Milk Will PRE, J.C.4
	Municipality SHOW HILLS County ESSEX Zip Code 07078
	Mailing Address, if different from above:
6	Please Fill Out Only if You Moved within the County after Registering Without Notifying Election Office
	Previous Home Address
	Municipality Zip Code
7	Date of Birth Month Day Year 18 Gender Chemale Male
9	NJ Driver's License (DL#) or MVC Non-driver ID (ID#) Number
	Telephone Number (Optional)
	If No DL# or ID#, last four digits of your Social Security Number (SS#)
10	☐ I affirm that I do not have a DL#/ID# or SS#
11	Political Party
11	Required for primary election; Optional for all other elections
	Voter Declaration — I swear or affirm that I am a U.S. citizen, live at the address above, am at least 18 years of age at the time of the election, have been a resident of the State and county at least 30 days before the election, am not on parole, probation or serving a sentence due to the 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 FIVE YEARS, OR BOTH PURSUANT TO R.S. 19:34-1. **Signature of Voter** Name of person providing assistance** **Indicate: The address above, am at least 18 years of age at the time of the election, am not on parole, probable of the election of the ele
	Mill-3

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New Jersey
Provisional Ballot Affirmation Statement

1	FOR OFFICIAL
	invoved within the county after registering without notifying election office
	Registration information missing from poll book Municipality/Ward/District:
	☐ Did not show required ID
	Poll book indicates you are a Mail-In Ballot voter, but did not apply for, receive, or return such ballot
2	2 I am a US citizen ☐ Yes ☐ No 3 I am 18 or older ☐ Yes ☐ No
4	Current Name Green card
	Last
	If your name was changed after registering to vote, provide your former name
	Former Name N/A
	Signature of Former Name
5	Current Home Address 866 Morris Tumpike AIK, Short Hills
	Current Home Address 866 Morris Tumpike 11 %, Short Hills Municipality County 7 Fixex Zip Code 07078
	Mailing Address, if different from above:
6	Please Fill Out Only if You Moved within the County after Registering Without Notifying Election Office
	Previous Home Address
	Municipality Zip Code
7	Date of Birth Month 27 Day / 6 Year / 972 8 Gender Female AMale
	NJ Driver's License (DL#) or MVC Non-driver ID (ID#) Number
	Telephone Number (Optional) 9 1 7 - 667-1972
	If No DL# or ID#, last four digits of your Social Security Number (SS#)
10	☐ I affirm that I do not have a DL#/ID# or SS#
11	Political Party
	Required for primary election; Optional for all other elections
12	Voter Declaration — I swear or affirm that I am a U.S. citizen, live at the address above, am at least 18 years of age at the time of the election, have been a resident of the State and county at least 30 days before the election, am not on parole, probation or serving a sentence due to the conviction for an indictable offense under any federal or State laws. I UNDERSTAND THATANY FALSE OR FRAUDULENT REGISTRATION MAY SUBJECT ME TO A FINE OF UP TO \$15,000, IMPRISONMENT UP TO FIVE YEARS, OR BOTH PURSUANT TO R.S. 19:34-1.
	X Signature of Voter Date
	Name of person providing assistance

mull-3

New Jersey Provisio

New Jersey Provisional Ballot Affirmation Statement

1/2	***/
1	Peason for Provisional Ballot (Check one) ☐ Moved within the county after registering without notifying election office ☐ Registration information missing from poll book ☐ Did not show required ID ☐ Poll book indicates you are a Mail-In Ballot voter, but did not apply for, receive, or return such ballot
2	I am a US citizen ☐ Yes ☐ No 3 I am 18 or older ☐ Yes ☐ No
4	Current Name Last
5	Current Home Address 866 MOTTIS TPK4 #36
	Municipality County Zip Code 0 70 78
	Mailing Address, if different from above:
6	Please Fill Out Only if You Moved within the County after Registering Without Notifying Election Office
	Previous Home Address
	Municipality Zip Code
7	Date of Birth Month Day Year 8 Gender Female Male
9	NJ Driver's License (DL#) or MVC Non-driver ID (ID#) Number Telephone Number (Optional) If No DL# or ID#, last four digits of your Social Security Number (SS#)
10	☐ I affirm that I do not have a DL#/ID# or SS#
11	Political Party
12	Voter Declaration — I swear or affirm that I am a U.S. citizen, live at the address above, am at least 18 years of age at the time of the election, have been a resident of the State and county at least 30 days before the election, am not on parole, probation or serving a sentence due to the 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 FIVE YEARS. OR BOTH PURSUANT TO R.S. 19:34-1. **Signature of Voter** Name of person providing assistance** **Date** Name of person providing assistance** **The Address above, am at least 18 years of age at the election, am not on parole, probation of person of person providing assistance* **Date** Name of person providing assistance** **The Address above, am at least 18 years of age at the election, am not on parole, probation of person providing assistance* **The Address above, am at least 18 years of age at the election, am not on parole, probation of person providing assistance* **The Address above, am at least 18 years of age at the election, am not on parole, probation of person providing assistance* **The Address above, am at least 18 years of age at the election, am not on parole, probation of age at the election, am not on parole, probation of age at the election, am not on parole, probation of age at the election, am not on parole, probation of age at the election, am not on parole, probation of age at the election, and the election, am not on parole, probation of age at the election, and the election, am not on parole, probation of age at the election, am not on parole, probation of age at the election, and the election, and the election of age at the election of age at the election, and the election of age at the election, and the election of age at the election

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Voter Prof" -

Voter Information:

Voter's Name: SAINTANIA FLORVIL

Date of Birth: 04/14/1987 101630896 Voter ID:

Legacy ID: C806299 Archived Legacy ID:

Residence Address:

County: ESSEX

Unit: 2 Suffix A: Suffix B:

Street Number: 134

Street Name: ELLERY AVE

Address Line 2: Address Line 3:

Municipality: NEWARK Postal City: NEWARK

State: NJ

Zip: 07106

Miscellaneous: Gender: Not Entered

Absentee Ballot Type: None Registration Date: 02/06/2006

101630896

M-0714 W-13 D-32

Registration Type: Mail-in without Identification

134 ELLERY AVE Apt-Unit 2

NEWARK NJ 07106

Last Action Taken Date: 09/07/2007

Inactive Confirmation Address:

Status Information:

Voting Privilege Date: 02/27/2006

Current Status: Active Date Last Voted:

Poll Worker Status: No

Street Number:

Suffix A: Suffix B:

Street Name/P.O. Box:

Unit:

Address Line 2:

Address Line 3:

City: State: Zip Code:

Country:

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:

Districts:

Ward Freeholder

13

District 5.002 School

32

Congressional

Regional School

10

Legislative 28

Fire

Previous Residence Addresses:

Change Date Street Number

06/05/2007

Street Name UNIVERSITY PL Address Line 2 Address Line 3

Unit Municipality

IRVINGTON

Zip Code

New Jersey

07111

Election History:

No Records Found for the Election History

I would like to Remouve from your System be cause I am not a u.s citize. Yet but soon!

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

08/16/2016

Polling Place:

Next Election Date -- Name

11/02/2010 -- STATE GENERAL 2010

Polling Place

ST. JOHN'S UKRANIAN SCH (H) GYM-MT. VERNON ANNEX

Address

746 SANDFORD AVE



COMMISSIONER OF REGISTRATION AND

SUPERINTENDENT OF ELECTIONS COUNTY OF ESSEX

Hall of Records - Room 417 - Newark, New Jersey 07102 (973) 621-5061 Tel. (973) 621-6464 Fax



ANNMARIE H ELDER 82 MADISON AVE IRVINGTON NJ 07111 Kathy V. Sumter acting/Commissioner of Registration Acting/Superintendent of Elections

/25/2011

Voter ID# 151683998



ANNMARIE H ELDER 82 MADISON AVE IRVINGTON NJ 07111

Dear Annmarie,

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

Your Voter Registration Application was not signed.

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,

KATHY V. SUMTER

DEPUTY SUPERINTENDENT OF

ELECTIONS

For not A US CITIZEN
Please remove me from your record

Putting Essex County First

ESSEX COUNTY IS AN EQUAL OPPORTUNITY EMPLOYER



New Jersey Voter Registration Application

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

1 Check box		ion □Addre	ess Change ture Update		ical Party Affil on-affiliation C			FOR OFFICIAL USE ONLY
that apply: 2 Are you a U.S	S. Citizen? Yes No	Will you		age by the no	ext election? form)	Yes □ N	lo	Clerk
3 Last Name	52.120	First Name MAHE	SWARY	Middle N	ame or Initial	Suffix (Jr., Sr., III)	Registration #
4 Date of Birth	Month 🗐							Polymer and the second
	ense Number or MVC Nor		ID, provide the	last 4 digits of you	License or MVC Non-D ir Social Security Numb Social Security N	per.		
6 Home Addr	ess (DO NOT use PO Bo	x) Apt.	Municipality	re.	County County	State Vij_ State	Zip Code Zip Code	\$ FEE
8 LastAddress	Registered to Vote (DO NOT)	use PO Box) Apt.	Municipality	У	County	State	Zip Code	□ by mail □ in person
9 Former Nar	ne if Making Name Ch	ange			one Number	855 4	5946-	
10 Do you wis	h to declare a political	party affiliation?	Yes, the	e party nam o not wish t	ne is o be affiliated	with ar	y political	party.
11 Gender Female	Declaration - I swear of I am a U.S. Citizen I live at the above add I will be at least 18 ye on or before the next	dress •	I will have resident least 30 day I am not on part sentence due to offense under a	rs before the ole, probation o a conviction	next election or serving a for an indictable	fr n ir	raudulent regi ne to a fine o mprisonment	hat any false or istration may subject f up to \$15,000, up to 5 years, ant to R.S. 19:34-1
Signature: Sign	n or mark and date on	lines below		If applicar name and	nt is unable to address of inc	comple dividual	te this form who comp	n, print the leted this form.
x Minks				Name Address _				Date
Date								



COMMISSIONER OF REGISTRATION AND SUPERINTENDENT OF ELECTIONS

COUNTY OF ESSEX

Hall of Records - Room 417 - Newark, New Jersey 07102 (973) 621-5061 Tel. (973) 621-6464 Fax



Carmine P. Casciano
Commissioner of Registration
Superintendent of Elections

CECILIA NTIAMOAH 200 JOHNSON AVE Apt-Unit 2 FL NEWARK NJ 07108

Dear Cecilia,

Kathy V. Sumter Edwards

Deputy Commissioner of Registration
Deputy Superintendent of Elections

06/29/2009

Voter ID# 151171346

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

I'm Sorry, lan not a coligen and rut

eligible to vote

Voter Signature

07-10-09

Please provide the missing information and sign this form in the space provided, and return to this office.

Thank you for your attention on this matter.

Sincerely Yours,

Superintendent of Elections

Commine P. Casciano



COMMISSIONER OF REGISTRATION AND

SUPERINTENDENT OF ELECTIONS

COUNTY OF ESSEX

Hall of Records - Room 417 - Newark, New Jersey 07102 (973) 621-5061 Tel. (973) 621-6464 Fax



Carmine P. Casciano
Commissioner of Registration
Superintendent of Elections

Kathy V. Sumter Edwards
Deputy Commissioner of Registration
Deputy Superintendent of Elections

ERMIRA MITRE 10 LOVEL CT Apt-Unit C NUTLEY NJ 07110 08/11/2009

Voter ID# 151198162



Dear Ermira,

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

• (If your signature is missing,

151198162

ERMIRA MITRE
10 LOVEL CT Apt-Unit C
NUTLEY NJ 07110

Voter Signature

Date

Please provide the missing information and sign this form in the space provided, and return to this office.

Thank you for your attention on this matter.

Sincerely Yours,

Carmine P. Casciano

Superintendent of Elections

P.S. I am not yet an american citizen, so I' don't have the Night to vote yet, according to the american constitution.

When Ill become a citizen I will register myself to vote. No cloubt about that.

Thanks.



AND

SUPERINTENDENT OF ELECTIONS **COUNTY OF ESSEX**

Hall of Records - Room 417 - Newark, New Jersey 07102 (973) 621-5061 Tel.

(973) 621-6464 Fax



Carmine P. Casciano Commissioner of Registration Superintendent of Elections

> ANDRANIK MELYAN 370F RIVER RD NUTLEY NJ 07110

Kathy V. Sumter Edwards Deputy Commissioner of Registration Deputy Superintendent of Elections

06/10/2009



Dear Andranik,

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

• (If your signature is missing,

Voter Signature

Please provide the missing information and sign this form in the space provided, and return to this office.

Thank you for your attention on this matter.

Sincerely Yours,

Deleted 08.03.09

07/07/2009

Identificación del Votante# 151174730



MARIA T LEON 189 S 11TH ST Apt-Unit 1 FL NEWARK NJ 07107

Estimado Maria,

Esta oficina acusa recibo de su formulario de inscripción de votante. Este formulario no se puede procesar completamente por la o las siguientes razones.

• Firma (si falta su firma, debe completar un nuevo formulario, que se adjunta)

Firma del votante Fecha

Proporcione la información faltante, firme este formulario en el espacio indicado y devuélvalo a esta oficina.

Agradecemos su atención a este asunto.

Atentamente,

Superintendente de Elecciones

YO Prosp Janke hara deseo de se

seterida del Sistama porque No

Soy Ciudadana aniericana solo soy

recidente. de los Esto dos unidos de

Omerica 5-29-2009 05/13/2009

ROSA I LARA
513 FERRY ST Apt-Unit 2

NEWARK NJ 07105

Estimado Rosa,

Esta oficina acusa recibo de su formulario de inscripción de votante. Este formulario no se puede procesar completamente por la o las siguientes razones.

• Firma (si falta su firma, debe completar un nuevo formulario, que se adjunta)

Firma del votante

Fecha

Proporcione la información faltante, firme este formulario en el espacio indicado y devuélvalo a esta oficina.

Agradecemos su atención a este asunto.

Atentamente,

Superintendente de Elecciones



COMMISSIONER OF REGISTRATION

SUPERINTENDENT OF ELECTIONS

COUNTY OF ESSEX

Hall of Records - Room 417 - Newark, New Jersey 07102 (973) 621-5061 Tel. (973) 621-6464 Fax



Carmine P. Casciano Commissioner of Registration Superintendent of Elections

Kathy V. Sumter Edwards Deputy Commissioner of Registration Deputy Superintendent of Elections

04/30/2009

Voter ID# 151138930



RAHAB W KABIRU 396 WOODLAND PL SOUTH ORANGE NJ 07079

Dear Rahab,

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

		365	,	
			1	
Voter Signature	Date			

Please provide the missing information and sign this form in the space provided, and return to this office.

Thank you for your attention on this matter.

Please, I'm not a USI
Citizen yet.
I'm a resident only.
Thank you

Sincerely Yours,

Superintendent of Elections



New Jersey Voter Registration Application

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

1 Check boxes	☐ Political Party Affiliation or Non-affiliation Change	FOR OFFICIAL USE ONLY
2 Are you a U.S. Citizen? ☐ Yes No Will you be 18 years of (If No, DO NOT complete this form) (If No, DO NOT complete this form)	of age by the next election? Yes KNo omplete this form)	Clerk
3 Last Name First Name OVIS	Middle Name or Initial Suffix (Jr., Sr., III)	Registration #
4 Date of Birth Month Day Year 19	317	Office Time Stamp
	Thave a NJ Driver's License or MVC Non-Driver e last 4 digits of your Social Security Number.	[13]
☐ "I swear or affirm that I DO NOT have a NJ Driver's License, MVC Non-		
6 Home Address (DO NOT USO PO BOX) Apt. Municipality 130 Ungan Avene 25+	ISSEX NO OWN	
7 Mailing Address if different from above Apt. Municipality	ty County State Zip Code ZSEX W OWN	
8 Last Address Registered to Vote (DO NOT use PO Box) Apt. Municipality Apr. Apr. Municipality Apr. 234	ty County State Zip Code	□ by _r mail □ in person
9 Former Name if Making Name Change	Day Phone Number (Optional) 862 ~ 218 ~ 9	1579
10 Do you wish to declare a political party affiliation? (Optional) Yes, th	e party name is o not wish to be affiliated with any political p	earty.
Female I am a U.S. Citizen I live at the above address Male I live at the above address I lam not on particular sentence due to sentence	role, probation or serving a me to a fine of to a conviction for an indictable imprisonment u	stration may subject up to \$15,000,
Signature: Sign or mark and date on lines below	If applicant is unable to complete this form name and address of individual who complete	• • • • • • • • • • • • • • • • • • • •
× Naus Tark	Name D	ate
Date 69/11		

New Jersey Voter Registration Application Please print clearly in ink. All information is required unless marked optional.

TICO.	rease plint ordary in mit. I'm information to regain	The state of the s	ounho o o uo	000000000000000000000000000000000000000				
1 Check boxes (that apply:	☐ New Registration ☐ Name Change	☐ Addres	☐ Address Change ☐ Signature Update	D Polit	☐ Political Party Affiliation or Non-affiliation Change	iation hange		FOR OFFICIAL USE ONLY
2 Are you a U.S. Citizen? Thes Mon (If No. DO NOT complete this form)	en? □ Yes No omplete this form)	Will you	Will you be 18 years of age by the next elec (If No, DO NOT complete this form)	age by the n	Will you be 18 years of age by the next election? ☐ Yes ☐ No (If No, DO NOT complete this form)	Yes 🗆 N	0	Clerk
3 Last Name	First	12:7	ہے	Middle N	Middle Name or Initial	Suffix (.	Suffix (Jr., Sr., III)	Registration #
4 Date of Birth	Month OU Day DINYear	/ [2] Ye	ar 1119710					Office Time Stamp
5 NJ Driver's License Number	lumber or MVC Non-driver ID Number	D Number	If you DONOT ha	ave a NJ Driver's ist 4 digits of you	If you DONOT have a NJ Driver's License or MVC Non-Driver ID, provide the last 4 digits of your Social Security Number.	river Per.		n Ju
☐ "I swear or affirm t	The same of affirm that I DO NOT have a NJ Driver's License, MVC Non-driver ID or a Social Security Number."	river's Licen	se, MVC Non-dr	iver ID or a	Social Security N	lumber."		
6 Home Address (bo No	DO NOT use PO Box,	0.5£	Municipality		County CXSSeX	State	Zip Code	
7 Mailing Address if	Mailing Address if different from above	Apt.	Municipality		County	State	Zip Code	
8 Last Address Registered to V	red to Vote (DONOT use POBox)	M Apt.	Municipality		County	State	Zip Code	ີ by mail ⊡ in person
9 Former Name if Making	laking Name Change		17.00	Day Phon (Optional)	Day Phone Number (Optional)			
10 Do you wish to declare (Optional)	sclare a political party affiliation?	affiliation?	☐ Yes, the party name is	party nan not wish 1	🗅 Yes, the party name is 🚉 स्थित। do not wish to be affiliated with any political party.	with an	y political p	зату.
11 Gender Decision on Inc.	Declaration - I swear or affirm that: 1 Inwe at the above address 1 Init be at least 18 years old on or before the next election	that:	I will have resided in the State and county at least 30 days before the next election I lam not on parole, probation or serving a sentence due to a conviction for an indictab offense under any federal or state laws	ed in the Stabefore the le, probation a conviction by federal o	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	∅ _ 7 E E E 2	understand the saddlent regions to a fine of a prisonment ports of the saddlent of the saddlen	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 m	Signature: Sign or mark and date on lines below	wole		ıf applicar name and	If applicant is unable to complete this form, print the name and address of individual who completed this f	comple	te this form who comp	If applicant is unable to complete this form, print the name and address of individual who completed this form.
				Name				Date
×				Address_				
	-							

151291940 55 TAPPAN AVE Apt-Unit 1 BELLEVILLE NJ 07109

MARITZA SUERO 55 TAPPAN AVE Apt-Unit 1 BELLEVILLE NJ 07109

01/29/2010

Identificación del Votante# 151291940



Estimado Maritza,

Esta oficina acusa recibo de su formulario de inscripción de votante. Este formulario no se puede procesar completamente por la o las siguientes razones.

• No firmó su solicitud de registro de votante.

Por favor llene completamente el formulario de registro de votante anexo (con porte postal pagado), incluyendo su firma, y entréguelo a nuestra oficina en persona o envíelo por correo.

Si tiene alguna pregunta, sírvase comunicarse a nuestra oficina.

Gracias por ayudar a resolver este asunto.

Atentamente, Commissioner of Registration /Superintendent of Elections

Superintendente de Elecciones

Aquien vaya dirigida ésta carta.

Gracias por enviar ésta solicitud de "Voter Register"

Devo hacerles saber, que el pasado julio 13-2009,

recien obtuve mi residencia Permanente de los USA.

Por lo eura aien no soy Ciudadana Americana.

Por hende no puedo llenar olicha aplicación. Gracios una vez mas