

**BUCKS COUNTY
BOARD OF ELECTIONS**

ROBERT J. HARVIE, JR., *CHAIRPERSON*
DIANE ELLIS-MARSEGLIA, LCSW
GENE DIGIROLAMO



BOARD OF ELECTIONS

BUCKS COUNTY BOARD OF ELECTIONS
55 E. COURT ST.
DOYLESTOWN, PA 18901
215-348-6154
FAX: 215-348-6387
WWW.BUCKSCOUNTY.GOV

Cancel and Reissue Ballot Request

I, _____, request that my ballot for the 2024 General Primary
be canceled and reissued.

Signature Date Date of Birth ID# or last 4 SSN

Email Address Phone Number

Mailing Address

City State Zipcode

Reason for Cancel and Replace: _____

How would you like to receive your ballot?

- Pick it up **55 East Court Street in Doylestown, PA** during our hours of operation on **Monday through Friday between 8:00AM to 5:00PM.**
- Mail it to the address stated above.
- Designate another person to pick it up in Doylestown, PA. [Complete this form](#) verifying you have a disability as defined by *the Americans with Disabilities Act* and that you are designating an agent to pick up your ballot. Please have your designated agent bring the form to our Doylestown office when they come to pick up your ballot.

When completed and signed, you can:

1. Scan and email this form (photos will also be accepted) to:
 - a. elections@buckscounty.org
2. Mail this form to:
 - a. Board of Elections
55 E. Court Street.
Doylestown, PA 18901