

California Vote-By-Mail Ballot Application

Enter the date of the election and the last day the application must be received by your county elections official. These dates can be found at www.sos.ca.gov/elections/elections_m.htm. A ballot will not be sent to you if this application is incomplete or inaccurate.

1. This is an application for a vote-by-mail ballot for the _____, _____ **election**
Month/Day/Year Type of Election (Primary, General, or Special)

2. This application must be received by your county elections official no later than 5:00 p.m. on _____
Month/ Day/Year

3. Print name: _____ 4. Date of birth: _____
First Middle Name or Initial Last Month/Day/Year

5. Residence address: _____
Number and Street (P.O. Box, Rural Route, etc. will not be accepted) (Designate N, S, E, W if used)

City ZIP Code California County

6. Mailing address for ballot (if different from above):

If your mailing address is outside of the United States, use the Federal Post Card Application at www.fvap.gov.

Number and Street/P.O. Box (Designate N, S, E, W if used)

City State or Foreign Country ZIP Code or Postal Code

7. Telephone number (optional): () _____ () _____
Daytime Evening

8. **Yes, I want to request a political party ballot for the primary election.**

I am not presently affiliated with any qualified political party. However, for this primary election only, I request a vote-by-mail ballot for the _____ Party.*

*For the June 8, 2010, Statewide Direct Primary Election, the Democratic and Republican parties will allow voters who are not affiliated with a qualified political party to vote in their **primary** elections. For more information, contact the Secretary of State at (800) 345-8683 or visit www.sos.ca.gov/elections/elections_decline.htm.

9. **Yes, I want to become a permanent vote-by-mail voter.**

By checking this box and by initialing here _____, I am requesting to become a permanent vote-by-mail voter. A vote-by-mail ballot will automatically be sent to me in all future elections. I understand that if I fail to vote by mail in two consecutive statewide general elections, I will need to reapply for permanent vote-by-mail voter status.

10. This application must be signed.

I have not applied for a vote-by-mail ballot from any other jurisdiction for this election. I certify under **penalty of perjury** under the laws of the State of California that the information I have provided on this application is true and correct.

Signature: _____ Date: _____

Warning: Perjury is a felony, punishable by imprisonment in state prison for up to four years. (Penal Code § 126)

FOR OFFICIAL USE ONLY

Notice

You have the legal right to mail or deliver this application directly to the local elections official of the county where you reside.

Returning this application to anyone other than your county elections official may cause a delay that could interfere with your ability to vote.

Only the registered voter himself or herself may apply for a vote-by-mail ballot. An application for a vote-by-mail ballot made by a person other than the registered voter is a criminal offense.

Individuals/Organizations/Groups Distributing this Application

The format used on this application must be followed by anyone distributing vote-by-mail ballot applications. Failure to conform to this format is a crime.

Anyone distributing this application may not preprint a mailing address in Item 6.

Anyone distributing this application may not preprint a check mark or political party name in Item 8.

Anyone providing this application to a voter must enter their name, address, and telephone number here:

Instructions for Completing California Vote-By-Mail Ballot Application

Who Can Use this Application

The uniform California Vote-By-Mail Ballot Application can only be used by a registered voter. If you have not already registered to vote, you can find a Voter Registration Form at www.sos.ca.gov/elections/elections_vr.htm, or pick one up at your county elections office, library, or U.S. Post Office. Your completed Voter Registration Form must be submitted to your county elections office at least 15 days before the election.

To vote by mail, you can use this Vote-By-Mail Ballot Application, use the form in the sample ballot booklet you receive in the mail, or send a written request to your county elections office. This Vote-By-Mail Ballot Application is provided by the Secretary of State (SOS) for use by any person, group, or organization distributing vote-by-mail ballot applications for elections that involve more than one county. For organizations distributing applications for elections that involve a single county, the county elections office should be contacted for the appropriate application format and barcode information.

Californians who are serving in the military or living or studying abroad must use a different form, the Federal Post Card Application (FPCA), to register and request a ballot. The FPCA can be found at www.sos.ca.gov/elections/elections_mov.htm.

What Can be Preprinted on this Application

State law requires the voter to personally affix his or her signature and the address to which the ballot is to be mailed.

If an organization is distributing the application, the name, address, and telephone number of the organization authorizing distribution must be included on the application.

In order to ensure accuracy, each voter should fill out all of the information on the application. However, any person, group, or organization distributing the application may preprint the following:

- The printed name and home address of the voter as it appears on the Voter Registration Form.
- The name and date of the election for which the ballot is requested.
- The date the application must be received by the county elections official.
- The name, address, and telephone number of the person, group, or organization authorizing distribution of the application.

How to Fill Out this Application

Item 1. Enter the date of the election in which you wish to vote (month, day, year), and the type of election (primary, general, or special).

Item 2. Enter the last day the application must be received by your county elections official. For specific deadline dates, visit the SOS website at www.sos.ca.gov/elections/elections_m.htm.

Item 3. Print your first, middle, and last names as they appear on your Voter Registration Form.

Item 4. Print your date of birth in this order – month, day, year.

Item 5. Print the complete street address of your voting residence. A post office box or rural route cannot be accepted.

Item 6. Mailing address information must be completed by the voter. Print the complete address where you want your ballot sent, if it is different than the residence address provided in Item 5.

Item 7. Print your telephone number (optional, not required) to allow the elections office to contact you if more information is needed.

Item 8. If you are not affiliated with a political party, you may request to vote a party ballot at a primary election if the political party allows it. The checkoff box and name of the political party must be completed by the voter. To find out which political parties have authorized “decline-to-state” voters to vote their party’s ballot, call the SOS’s toll-free Voter Hotline at (800) 345-VOTE (8683). If you decline to state a political party in a primary election, you will be provided a nonpartisan ballot containing only the names of candidates for nonpartisan offices and measures to be voted for at the primary election unless you request a ballot of a political party.

Item 9. Any registered voter may receive a vote-by-mail ballot automatically in all future elections by checking the Permanent Vote-By-Mail Voter box and initialing the line. Any voter can opt out of the permanent vote-by-mail status at any time by contacting their county elections official directly.

Item 10. Sign and date in this order – month, day, year. No witness or notary required.

How to Submit this Application

Your Vote-By-Mail Ballot Application must be returned to your county elections official at least 7 days before the election. However, if you become ill or disabled during the final week before an election, or find that you will be unable to go to your polling place on

election day, you may request that a vote-by-mail ballot be delivered to you by submitting a written application or letter to your county elections official. The request must contain your name and residence address, the address to which you want the ballot sent, the name and date of the election in which you would like to vote, your signature, and the date. You may authorize another person to receive the ballot from the elections official, and/or return the ballot to an elections official after you have voted it.

Please do not send applications to the SOS's office. Doing so will delay the application process.

You can find the address and telephone number of your county elections official on the SOS website at www.sos.ca.gov/elections/elections_d.htm.

(Revised April 2010)