Unsigned Ballot Envelope Statement (EC 3019)

*NOTICE TO VOTER* YOU DID NOT SIGN YOUR VOTE BY MAIL BALLOT IDENTIFICATION ENVELOPE

Read instructions carefully before completing the statement. Failure to follow these instructions may cause your ballot not to count.

To ensure your vote by mail ballot will be counted, immediately complete and return this statement so it reaches the Elections Office before 5 p.m. on the eighth day (Wednesday) after the election. You must sign your name on the voter signature line, then select one of the return options:

Return Options
1. Stamp and address an envelope to the Elections Office at PO Box 247, Mariposa, CA 95338 and insert this signed form. You can mail or personally drop it off at the Mariposa County Elections Office. If mailing, double check the Elections Office address and postage for accuracy.
2. Scan and e-mail your signed statement to: kherman@mariposacounty.org
3. FAX your signed statement to the Elections Office at (209) 966-6496.
4. Drop-off your signed statement at a polling place or a ballot drop-off box within the county before the close of the polls on Election Day.

“I, ____________________________________________, am a registered voter of Mariposa County, State of California. I do solemnly swear (or affirm) that I returned a vote by mail ballot and that I have not and will not vote more than one ballot in this election. I understand that if I commit or attempt any fraud in connection with voting, or if I aid or abet fraud or attempt to aid or abet fraud in connection with voting, I may be convicted of a felony punishable by imprisonment for 16 months or two or three years. I understand that my failure to sign this statement means that my vote by mail ballot is not eligible to be counted.”

Voter Signature: ____________________________________________

Voter Residence Address: ____________________________________________

Street Address City Zip Code

SELECT AN OPTION BELOW TO DELIVER YOUR SIGNATURE:

1. MAIL: PO Box 247, Mariposa, CA 95338

2. E-MAIL: Scan signed statement and e-mail to: kherman@mariposacounty.org

3. FAX: (209) 966-6496

4. IN PERSON: Sign ballot envelope at the Elections Office or return this signed form