

**LETTER TO VOTER
SIGNATURE ON IDENTIFICATION ENVELOPE DOES NOT MATCH
SIGNATURE ON AFFIDAVIT OF REGISTRATION**

Date: _____

Voter's Name: _____

Voter's address: _____

City State, Zip Code: _____, _____

Dear Voter:

READ THESE INSTRUCTIONS CAREFULLY. FAILURE TO FOLLOW THESE INSTRUCTIONS MAY CAUSE
YOUR VOTE BY MAIL BALLOT NOT TO COUNT.

1. We have determined that the signature you provided on your vote by mail ballot does not match the signature(s) on file in your voter record. In order to ensure that your vote by mail ballot will be counted, the signature verification statement must be completed and returned as soon as possible.
2. The signature verification statement must be received by the elections official of the county where you are registered to vote no later than 5 p.m. two days prior to certification of the election.
3. You must sign your name where specified on the signature verification statement (Voter's Signature).
4. Place the signature verification statement into a mailing envelope addressed to your local elections official. Mail, deliver, or have the completed statement delivered to the elections official. Be sure there is sufficient postage if mailed and that the address of the elections official is correct.
5. If you do not wish to send the signature verification statement by mail or have it delivered, you may submit your completed statement by email: Clerk@SantaBarbaraCA.gov; or facsimile transmission: (805) 897-2623 to your local elections official using the information provided.

SIGNATURE VERIFICATION STATEMENT

I, _____, am a registered voter of Santa Barbara County, State of California. I declare under penalty of perjury that I requested and returned a vote by mail ballot. I am a resident of the precinct in which I have voted, and I am the person whose name appears on the vote by mail ballot envelope. 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 will be invalidated.

Voter's Signature:

Address:

Your prompt attention to this matter will ensure that your ballot will be counted.

Please contact me at 805-564-5309 or clerk@santabarbaraca.gov if you have any questions or need further information.

Sarah Gorman, CMC, City Clerk Services Manager