

COUNTY OF SACRAMENTO

Voter Registration and Elections

Vote by Mail

7000 65th Street, Suite A

Sacramento, CA 95823

(916) 875-6155 | Fax (916) 854-9796

Email: VBM@SacCounty.net

General Election – November 6, 2018

SIGNATURE VERIFICATION STATEMENT

**NOTICE TO VOTER – THE SIGNATURE ON YOUR BALLOT ENVELOPE DID NOT MATCH THE SIGNATURE(S) WE HAVE ON FILE
FAILURE TO FOLLOW THESE INSTRUCTIONS MAY CAUSE YOUR BALLOT NOT TO BE COUNTED.**

You must use one of the following options:

- **Drop off signed statement.** You may drop off your completed Signature Verification Statement at any Vote Center or Ballot Drop Box location for Sacramento County on or before 8:00 p.m. on Election Day, November 6, 2018.
- **Email signed statement to our office.** You may email your completed Signature Verification Statement to VBM@SacCounty.net.
- **Fax signed statement to our office.** You may fax your completed Signature Verification Statement to (916) 854-9796.
- **Mail signed statement in the enclosed envelope to our office.** If you choose to return your completed Signature Verification Statement via mail, YOU MUST PLACE POSTAGE on the return envelope provided.
- **Come to our office in person.** You may come to our office and return your completed Signature Verification Statement at 7000 65th Street, Suite A, Sacramento, CA 95823. Office hours are Monday through Friday 8:00 a.m. to 5:00 p.m.

COMPLETE ALL INFORMATION

I, _____, am a registered voter of Sacramento County,
(Print Name of Voter)

State of California. I do solemnly swear (or affirm) that I returned a 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 ballot is not eligible to be counted.

Signature of Voter:

Date:

Birthdate:

Residential Address:

City, State, Zip Code: