

PERMANENT MAIL BALLOT APPLICATION

Any voter may request to be a Permanent Mail Voter, please complete this form. A mail ballot will automatically be sent to you for future elections. Failure to return a mail ballot for four consecutive statewide general elections will cancel your Permanent Mail Voter Status and you will need to reapply. If you have any questions concerning voting by mail ballot, please call the San Diego County Registrar of Voters at 858-565-5800. (Elections Code Section 3201, 3206)

PRINT NAME: _____ **DATE OF BIRTH:** _____
(First) (Middle) (Last)

RESIDENCE ADDRESS IN SAN DIEGO COUNTY: (Please Print)

Number and Street (P.O. Box, Rural Route, etc. not acceptable - designate N, S, E, W, if used)

(City) (State or County) (Zip Code)

TELEPHONE NUMBER: () _____ () _____

EMAIL ADDRESS: _____

ADDRESS WHERE BALLOT IS TO BE MAILED, IF DIFFERENT FROM YOUR ADDRESS:
Note: Organizations distributing this form may not preprint mailing address.

(Number and Street/P.O. Box)

(City) (State or County) (Zip Code)

THIS APPLICATION WILL NOT BE ACCEPTED WITHOUT THE PROPER SIGNATURE OF THE APPLICANT

I certify under penalty of perjury under the laws of the State of California that the name and residence on this application are true and correct.

X _____
Signature or mark an "X" if unable to sign (Power of Attorney NOT Accepted) Date

If the voter is unable to sign, s/he may make a mark witnessed by at least one person. _____
Witness

WARNING: Perjury is punishable by imprisonment in State prison for two, three or four years. (Section 126 of the Ca. Penal Code)

THIS FORM IS PROVIDED BY: SAN DIEGO COUNTY REGISTRAR OF VOTERS INTERNET

NOTICE: You have the legal right to mail, fax or deliver this application directly to the local elections official where you reside. This address is:

Registrar of Voters
5600 Overland Avenue, Suite 100
P.O. Box 85520
San Diego, CA 92186-5520
Office: (858) 565-5800 Fax: (858) 694-2955 – (858) 505-7294

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

The format used on this application must be used by **ALL** individuals, organizations and groups that distribute mail ballot applications. Failure to conform to this format may result in criminal prosecution. (Elections Code Section 3007 & 18402)

INFORMATION FOR CAMPAIGNS USING THIS FORM:

Any individual, group, or organization that distributes mail applications must include their name, address and telephone number of the campaign at the bottom of the form after the words "THIS FORM IS PROVIDED BY". Applications received from campaigns without this information will be rejected.