POLL WORKER USE ONLY

O N/A O SB 207

O CVR O PROV

O CURBSIDE VOTER

BALLOT APPLICATION COUNTY OF SAN DIEGO, CALIFORNIA

PRESIDENTIAL GENERAL ELECTION TUESDAY, NOVEMBER 3, 2020



		PART	1		
I hereby request a ballot	for this election.				
Thereby request a ballet					
VOTER'S NAME:			DATE OF BIRTH:		
(PLEASE PRINT) (Last)		(First)	(Middle)	(MM/DD/YYYY)	
ADDRESS:	e address in San Diego (County (P.O. Boy Rural R	Poute etc not accentable.	– designate N, S, E, W, if used)	
redidente	o address in Gan Diego ((1.0. Box, Narar N	outo, oto. Not docopiable	addignate N, G, E, W, II adday	
	CA (City) State (Zip Code)		TELEP	TELEPHONE:	
(City)	State	(Zip Code)			
I certify under penalty of true and correct.	perjury under the la	ws of the State of Ca	lifornia that the name	e and residence on this application are	
SIGNATURE				DATE	
		PART	2		
	(To be c	ompleted at CHEC		NLY)	
within San Diego County	y. This may only be co	mpleted during the time	vote in San Diego Cou period of the 3rd day b	unty who is requesting a change of address pefore an election up until the close of the ections Code §§ 2119.5, 2152)	
□ I want to change ı	my address. My p	revious address v	vas:		
		Residence address of	nly (not a P.O. Box)		
City		State		Zip	
on,		Claio		- -P	