

# San Diego Registrar of Voters

## Specific Needs Survey

The Registrar of Voters is committed to providing quality service. We are looking for input from voters with specific needs.

Please take a few moments to fill out and return this card.

Are you a voter with specific needs: ☐ Yes ☐ No

If yes, please check one of the following that best fits your need:

☐ Hearing impaired

☐ Physical disability

☐ Sight impaired

☐ Speech impaired

☐ Other – Please describe: \_\_\_\_\_

Please give us the precinct number (found on your sample ballot) or location of your polling place.

**(For a survey in an alternate format, call 858.505.7389)**

**Please rate the following by circling the appropriate number:**

**1 = Poor 5 = Excellent**

Access to the polling place – getting to and from site	<b>1 2 3 4 5</b>
Ease of voting – booth, touchscreen, ballot, etc.	<b>1 2 3 4 5</b>
Quality of assistance – courteous, knowledgeable, helpful	<b>1 2 3 4 5</b>
Your overall satisfaction with your voting experience	<b>1 2 3 4 5</b>

What one thing could we do to improve service to you?

If you have a specific request or question, please include your name and contact information (mailing address, email and/or phone).

Please mail your completed survey to Registrar of Voters, 5600 Overland Ave., San Diego, CA 92123

Fax (858) 505-7294

Email [ROVmail@sdcounty.ca.gov](mailto:ROVmail@sdcounty.ca.gov)