

## Your signature is missing on your vote-by-mail ballot envelope

The Shasta County Elections Department received your vote-by-mail ballot envelope without your signature. For your ballot to be counted, we must get your signature.

You may either come to our office and sign your ballot envelope by 5pm April 3, 2019 or submit the *unsigned ballot envelope statement* below. (Elections Code §3019)

Read these instructions carefully before completing the statement. Failure to follow these instructions may cause your ballot not to count.

1. Complete the statement below and make sure you sign your name.
2. Use one of the following methods to return your statement:
  - Mail the *statement* to Shasta County Elections, PO Box 990880, Redding CA 96099-0880, so that it will reach us no later than 5pm, April 3, 2019.  
Remember to place a first class stamp on the envelope.  
You may also deliver the statement to our office or have someone else deliver it for you.
  - FAX the *statement* to 530-225-5454 no later than 5pm, April 3, 2019.
  - Deliver the *statement* on Election Day to a polling place in Shasta County by 8pm, Tuesday, March 26, 2019 or
  - Drop the *statement* off on Election Day in a designated ballot drop box in Shasta County by 8pm, Tuesday, March 26, 2019.

### Unsigned ballot envelope statement

I, \_\_\_\_\_, am a registered voter of Shasta County, State of California.

I do solemnly swear (or affirm) that I requested and returned a vote-by-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 vote-by-mail ballot will be invalidated.

#### Voter's Signature:

|   |       |
|---|-------|
| X | Date: |
|---|-------|

If the voter cannot sign his/her name, have the voter make a mark in the box above and then the witness signs here: \_\_\_\_\_

#### Address where you live in Shasta County:

Number & Street

City

State

Zip