



**Darlene E. Ingersoll**  
Registrar of Voters

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Equal Opportunity Employer

## Oath of Voter

I, \_\_\_\_\_, understand that by returning my voted ballot via fax transmission  
Print your full name

that I have relinquished my right to a **secret ballot**. Your ballot can only be returned by fax. **Ballots cannot be returned via email** pursuant to Elections Code §3106.

My Merced County residence address is:

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City

\_\_\_\_\_  
Zip Code

I am a resident of **Merced County** and a voter of the precinct, and the person whose name appears on this declaration. I have not applied, nor intend to apply, for a Vote by Mail ballot from any other jurisdiction for the same election.

I declare under penalty of perjury under the laws of the **State of California** that the foregoing declarations are, to the best of my knowledge and belief, true and correct.

\_\_\_\_\_  
Signature (power of attorney cannot be accepted)

\_\_\_\_\_  
Date

**YOUR BALLOT CANNOT BE COUNTED UNLESS YOU SIGN THE ABOVE OATH AND INCLUDE IT IN THE SAME FAX TRANSMISSION WITH YOUR BALLOT.**

**STRIVING FOR EXCELLENCE**