

Merced County Vote-By-Mail Ballot Application

FOR OFFICIAL USE ONLY

Rev. 12/2014

Enter the date of the election and the type of election (e.g., Primary, General, or Special). This application must be received by your county elections official not later than seven (7) days prior to the date of the election. The date of the election can be found at www.mercedelections.org. A ballot will not be sent to you if this application is incomplete or inaccurate.

1. This is an application for a vote-by-mail ballot for the _____, _____ election.
Month/Day/Year Type of Election (Primary, General, or Special)

2. Print name: _____ 3. Date of birth: _____
First Middle Name or Initial Last Month/Day/Year

4. Residence address: _____
Number and Street (P.O. Box, Rural Route, etc. will not be accepted) (Designate N, S, E, W if used)

City Zip Code California County

5. Mailing address for ballot (if different from above):
If your mailing address is outside of the U.S., and you are a military or overseas voter, re-register at RegisterToVote.ca.gov or use the Federal Post Card Application at www.fvap.gov.

Number and Street/P.O. Box (Designate N, S, E, W if used)

City State or Foreign Country Zip Code or Postal Code

6. Telephone number (optional): (____) _____ (____) _____
Day Evening

7. (Only complete Item 7 if this application is for a Presidential Primary Election.)
Yes, I want to request a political party ballot for the Presidential Primary Election.
I have declined to disclose a preference for a qualified political party. However, for this primary election only, I request a vote-by-mail ballot for the _____ Party.*

* To find out if a qualified political party will allow voters who have declined to disclose a preference for a political party to vote the ballot of that political party, contact the Secretary of State at (800) 345-8683 or visit www.sos.ca.gov/elections/no-party-preference.htm.

8. **Yes, I want to become a permanent vote-by-mail voter.**
By checking this box and by initialing here _____, I am requesting to become a permanent vote-by-mail voter. A vote-by-mail ballot will automatically be sent to me in all future elections. I understand that if I fail to vote by mail in four consecutive statewide general elections, I will need to reapply for permanent vote-by-mail voter status.

9. **This application must be signed.**
I have not applied for a vote-by-mail ballot from any other jurisdiction for this election. I certify under **penalty of perjury** under the laws of the State of California that the information I have provided on this application is true and correct.

Signature: _____ Date: _____

Warning: Perjury is a felony, punishable by imprisonment in state prison for up to four years. (Penal Code § 126)

NOTICE

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

Only the registered voter himself or herself may apply for a vote-by-mail ballot. An application for a vote-by-mail ballot made by a person other than the registered voter is a criminal offense.

RETURN INFORMATION

You can return your application by one of the following.

Mail: Merced County Registrar of Voters 2222 M Street, Room 14 Merced, CA 95340

Fax: (209) 385-7387

Scan and email: elections@countyofmerced.com

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