



## Application for Official Permanent Vote by Mail Ballot

To obtain an official vote by mail ballot for each election that you are eligible to vote in please complete this form:

1. PRINT NAME: \_\_\_\_\_  
FIRST NAME MIDDLE NAME/INITIAL LAST NAME

2. DATE OF BIRTH: \_\_\_\_\_  
MONTH DAY YEAR

3. CALIFORNIA ID OR DRIVER'S LICENSE NUMBER: \_\_\_\_\_

4. RESIDENCE ADDRESS IN MERCED COUNTY: (PLEASE PRINT)

\_\_\_\_\_  
NUMBER AND STREET (PO BOX, RURAL ROUTE, ETC. NOT ACCEPTABLE)

\_\_\_\_\_  
CITY STATE ZIP CODE

5. TELEPHONE NUMBER: DAY: \_\_\_\_\_ EVENING: \_\_\_\_\_

6. MAILING ADDRESS FOR BALLOT IF DIFFERENT FROM ABOVE:  
(PLEASE PRINT)

\_\_\_\_\_  
NUMBER AND STREET/ PO BOX

\_\_\_\_\_  
CITY STATE OR COUNTRY ZIP CODE

**\*THIS APPLICATION WILL NOT BE ACCEPTED WITHOUT THE  
PROPER SIGNATURE OF THE APPLICANT\***

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

Mail application to: Merced Registrar of Voters  
2222 "M" Street  
Merced, CA 95340  
Phone: (209) 385-7541  
Fax: (209) 385-7387

**NOTE: FAILURE TO VOTE YOUR OFFICIAL VOTE BY MAIL BALLOT MAY RESULT IN YOU  
BEING REMOVED FROM THE PERMANENT VOTE BY MAIL ROLL.**