



OFFICE OF
ASSESSOR-COUNTY CLERK-RECORDER & ELECTIONS
REGISTRATION & ELECTIONS DIVISION
COUNTY OF SAN MATEO

**SIGNATURE VERIFICATION STATEMENT FOR THE
JUNE 23, 2020 COUNTY SERVICE AREA NO. 1 SPECIAL MAIL BALLOT ELECTION**

Please read these instructions carefully before completing the statement. Failure to follow these instructions may cause your vote by mail ballot not to count.

1. You must sign this statement in the box below.
2. You may return this statement by mail or in person at 40 Tower Road, San Mateo, CA 94402. Please be sure there is sufficient postage if you mail this statement.
3. If you do not wish to mail or deliver this statement, you may also return it by email at registrar@smcacre.org or by fax at 650.312.5348.
4. Please return this statement no later than **5:00 pm on July 8, 2020**.

PRINT YOUR NAME HERE

I, _____, am a registered voter in San Mateo County, State of California. I declare under penalty of perjury that I requested and returned a vote by mail ballot. I am a resident of the precinct in which I have voted, and I am the person whose name appears on the vote-by-mail ballot envelope. 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

| SIGNATURE | DATE |
|-----------|------|
| X | |

ADDRESS (NUMBER, STREET AND APT. OR SUITE NO.)

CITY, STATE AND ZIP CODE

If you have any questions or need further assistance, you may contact our office at 650.312.5222 or registrar@smcacre.org.