



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

**Unsigned Ballot Statement for the
 June 23, 2020 County Service Area No. 1 Special Mail Ballot Election**

VOTER'S INFORMATION

<p>ADDRESS (NUMBER, STREET AND APT. OR SUITE NO.)</p> <div style="border: 1px solid black; height: 50px; width: 100%;"></div>
<p>CITY, STATE AND ZIP CODE</p> <div style="border: 1px solid black; height: 50px; width: 100%;"></div>

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

You must sign this statement in the box below.

You may return this statement at any Vote Center or drop-off box through 8 p.m. on June 23, 2020. This statement may also be returned by fax (650.312.5348), email (registrar@smcacre.org) or in person at 40 Tower Road through 5 p.m. on July 8th, 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 or "Mark of Applicant" in voter's own hand – Do Not Print – Power of Attorney NOT accepted)

<p>SIGNATURE</p> <p>X</p>	<p>DATE</p>
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WITNESS SIGNATURE IF VOTER IS USING "MARK" FOR SIGNATURE ABOVE

<p>SIGNATURE</p>	<p>DATE</p>
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If you have any questions or need further assistance, you may contact our office at 650.312.5222 or registrar@smcacre.org.