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

MARK CHURCH
CHIEF ELECTIONS OFFICER &
ASSESSOR-COUNTY CLERK-RECORDER

Replacement Vote by Mail Ballot Application for the June 5, 2018 Statewide Direct Primary Election

To obtain a replacement Vote by Mail ballot for the June 5, 2018 Statewide Direct Primary Election only, complete the information on this form and sign on the **X**. This application must be received by the Registration & Elections Division no later than May 29, 2018.

I hereby declare that my Vote by Mail ballot for the June 5, 2018 Statewide Direct Primary Election was:

☐ Never Received ☐ Damaged, Destroyed or Spoiled ☐ Lost

Voter Information

Last Name	**First Name**	**Middle Name**

Date of Birth	**Phone Number** (optional)

Residence Address (as registered – PO Boxes and business addresses are not acceptable)		
City	**State**	**Zip**
Mailing Address to send ballot (if different than above)		
City	**State**	**Zip**

THIS APPLICATION WILL NOT BE ACCEPTED WITHOUT THE SIGNATURE OF THE APPLICANT.

I attest that I have not applied, nor do I intend to apply, to vote by mail in any other jurisdiction for this election. I certify under penalty of perjury under the laws of the State of California that the name, address and other information I provided on this application are true and correct. *Warning: Perjury is punishable by imprisonment in state prison for two, three or four years (CA Penal Code §126).*

X_____

Signature of Voter **Date**

If voter is unable to sign, please use a "mark" above and have a witness sign below:

_____

If necessary: Witness Signature for voter making "mark" as signature

Please send the completed application to the Registration & Elections Division by:
Email registrar@smcacre.org **Fax** 650.312.5348 **or Mail** 40 Tower Road, San Mateo, CA 94402