



Sutter County Elections

1435 Veterans Memorial Circle
Yuba City, CA 95993
(530) 822-7122 Fax (530) 822-7587

UNSIGNED BALLOT ENVELOPE STATEMENT

EC 3019

**NOTICE TO VOTER – YOU DID NOT SIGN YOUR VOTE BY MAIL BALLOT RETURN ENVELOPE
PLEASE READ THESE INSTRUCTIONS CAREFULLY BEFORE COMPLETING THE STATEMENT. FAILURE TO
FOLLOW THESE INSTRUCTIONS MAY CAUSE YOUR BALLOT NOT TO COUNT.**

- **Come to our office in person** and sign your original Vote by Mail Ballot Envelope, Monday through Friday 8:00 am to 5:00 pm before Election Day *November 8, 2016*, or on Election Day between the hours of 7:00 am and 8:00 pm.
- **Mail the signed Statement** to the Elections Office to be received no later than 5:00 pm *November 16, 2016*. **Important: you must affix appropriate postage. Postmarks will not count.**
- **Fax the signed Statement** to 530-822-7587 must be received by 5:00 pm *November 16, 2016*.

OR

- **Deliver the completed statement** to any poll place by 8 p.m. on **Election Day *November 8, 2016***. **A list of the Sutter County Polling Places is on the back of this Form.**

Regardless of how your completed Unsigned Ballot Statement is returned, it must be received at the Elections Office at the address above before 5:00 pm, on *November 16, 2016*.

Please complete all the following information:

I, _____, am a registered voter of Sutter County, State
(Print Name of Voter)

of California. I do solemnly swear (or affirm) that I requested and returned a vote by mail ballot and that I have not and will not vote more than one ballot in this election. 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.

(Signed) _____
Voter's Signature (power of attorney cannot be accepted)

(Witness) _____

If voter is unable to sign, he or she may make a mark which shall be witnessed by one person.

Dated this _____ day of _____, 2016.

Residence address: _____
Street Address City Zip Code

Mailing address: _____
Street Address City Zip Code