No Party Preference Cross-Over Ballot Notice and Application

March 5, 2024, Presidential Primary Election

NOTICE: Any voter that has declined to disclose a political party preference on their voter registration may request a one-time ballot for a political party that is allowing cross-over voting in the presidential primary election.

THIS IS AN APPLICATION TO RECEIVE A CROSS-OVER BALLOT:

1. I have declined to disclose a preference for a qualified political party. The below-listed political parties are allowing cross-over voting in this election. For the March 5, 2024, Presidential Primary Election only, I request a ballot for the following political party (select only one):

   ☐ American Independent Party ☐ Democratic Party ☐ Libertarian Party

2. **PRINT NAME:** _____
   First Middle or Initial Last

3. **DATE OF BIRTH:** _____
   Month/Day/Year

4. **RESIDENCE ADDRESS:** _____
   Number and Street (P.O. Box, Rural Route, etc. will not be accepted) (Designate N, S, E, W if used)

   _____
   City Zip Code California County

5. **MAILING ADDRESS FOR BALLOT (IF DIFFERENT FROM ABOVE):**

   If your mailing address is outside of the U.S., and you are a military or overseas voter, register at RegisterToVote.ca.gov or use the Federal Post Card Application at www.fvap.gov.

   _____
   Number and Street/P.O. Box (Designate N, S, E, W if used)

   _____
   City State or Foreign Country Zip Code or Postal Code

6. **THIS APPLICATION MUST BE SIGNED.**

SIGNATURE _____ **DATE** _____

WHO CAN USE THIS APPLICATION

If you are not registered to vote with any political party and you would like to vote for a presidential candidate of a political party allowing cross-over voting in the presidential primary election, you may use this application to request a political party's ballot.

HOW TO FILL OUT THIS APPLICATION

ITEM 1. Affirm that you are registered to vote and have not disclosed a political party preference and select the eligible political party whose ballot you would like to receive for the presidential primary election.
ITEM 2. Print your first, middle, and last names as they appear in your voter registration record.
ITEM 3. Print your date of birth in this order – month, day, year.
ITEM 4. Print the complete street address of your voting residence. A post office box or rural route cannot be accepted.
ITEM 5. Mailing address information must be completed by the voter. Print the complete address where you want your ballot sent if it is different than the residence address provided in Item 4.
ITEM 6. Sign and date in this order – month, day, year. No witness or notary required.

HOW TO SUBMIT THE APPLICATION

Your No Party Preference Cross-Over Ballot Notice and Application must be returned to your county elections official in person, by mail, email, or fax.

County of San Luis Obispo Clerk-Recorder
1055 Monterey Street, Suite D120 | San Luis Obispo, CA 93408
(P) 805-781-5228 | (F) 805-781-1111 | elections@co.slo.ca.us

Please do not send applications to the Secretary of State's office. Doing so will delay the application process.

CONTACT INFORMATION

For information regarding which political parties have adopted cross-over voting for the presidential primary election, please contact the Secretary of State's office at (800) 345-VOTE (8683).