

# AUGUST 30, 2011 CITY OF SAN LUIS OBISPO SPECIAL ELECTION

## NOTICE TO VOTER: VOTING TWICE IS A FELONY! EC18560(b)

I, \_\_\_\_\_, am at least 18 years old and a U.S. Citizen,

(Please print name)

and a registered voter residing in the County of San Luis Obispo and requesting the following:  
mark the applicable box(es) below.

### REQUEST FOR VOTE- BY- MAIL BALLOT

I hereby declare that I will be unable to go to the Polls on Election Day for one of the following reasons:

- Illness or disability resulting in my confinement in a hospital, sanatorium, nursing home, or my place of residence;
- Inability due to physical disability; and existing architectural barriers at my polling place which deny my physical access to the polling place, voting booth, or voting apparatus or machinery;
- Any other conditions which will result in my absence from the precinct on election day.

I understand that, after voting the ballot, I shall return the ballot personally or through the below authorized representative to either the County Clerk-Recorder's Office or to any polling place within the County of San Luis Obispo, no later than 8:00pm on the day of the election.

### STATEMENT OF LOST BALLOT

I request a replacement ballot because my ballot was destroyed, not received or has been lost.

### AUTHORIZATION FOR INDIVIDUAL TO PICK UP AND/OR RETURN BALLOT

I authorize \_\_\_\_\_ to pickup and/or return my ballot.

### CHANGE OF ADDRESS AND REQUEST FOR VOTE-BY-MAIL BALLOT- Voter must be present at the office of the Clerk-Recorder to change their address.

See reasons and declaration under Request for Vote-by-Mail above.

I have moved since the last election and did not complete a new voter registration card.

Complete old residence address information below.

Old Residence Address \_\_\_\_\_

I am fully aware of the provisions of Section 18560(b) of the Elections Code of the State of California which provides that voting twice constitutes a felony.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on \_\_\_\_\_ 20\_\_\_\_, at \_\_\_\_\_, CA.  
(City)

\_\_\_\_\_  
Signature of Voter

\_\_\_\_\_  
Residence Address of Voter

\_\_\_\_\_  
Mailing Address (if any)

Please place my name on the Permanent Vote-by-Mail Voter list.

Please remove my name from the Permanent Vote-by-Mail Voter list.

### FOR ELECTION STAFF TO COMPLETE

Voter's signature matches. If the signature does not match, voter must complete new registration card.

Voter's address changed in DIMS