

JOSEPH E. HOLLAND
County Clerk, Recorder and Assessor

RENEE BISCHOF
Chief Deputy Registrar of Voters



4440-A Calle Real
Santa Barbara, CA 93110

Mailing Address:
PO Box 61510
Santa Barbara, CA 93160-1510

**COUNTY CLERK, RECORDER AND ASSESSOR
ELECTIONS DIVISION**

- PATIENT
 - STAFF

(THIS FORM MUST BE RETURNED IN PERSON TO OUR OFFICE)

UNIT NAME: _____

**DECLARATION OF LATE VOTE BY MAIL BALLOT
and/or**

Rm# _____

DESIGNATION OF AUTHORIZED REPRESENTATIVE

In compliance with the provisions of Section 3021 of the Election Code, I, the undersigned, request a Vote by Mail Ballot for the **Presidential General Election** to be held on **November 8, 2016**. If requesting a second ballot, complete the Second Ballot Request section below.

I am a registered voter in the County of Santa Barbara, State of California.

Name as registered

Residence Address as registered (PO Box not acceptable)

I will be unable to go to the voting polls on Election Day due to (check one):

- Illness or disability resulting in confinement in a health care facility or place of residence; or inability to access my polling place.
- Absence from my precinct on Election Day.

I authorize PATRICIA DOOLEY to pick up and deliver my vote by mail ballot.
(Print Name)

Signature of authorized representative Patricia Dooley

SECOND BALLOT REQUEST (EC §3014)

I HEREBY STATE UNDER PENALTY OF PERJURY THAT I HAVE (check one)

- NEVER RECEIVED
- LOST
- DESTROYED/SPOILED
- OTHER _____

I UNDERSTAND THAT IT IS A CRIME TO VOTE TWICE AND IF I ATTEMPT TO VOTE MORE THAN ONE BALLOT, BOTH BALLOTS SHALL BE VOID.

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

Executed by me on this 8th day of November 2016, in Santa Barbara, California

Signature Patricia Dooley

FOR OFFICE USE ONLY:

Precinct Number _____

Ballot Series _____

Primary Only:

Registered Party _____

Party Issued _____

Place Label Here

Toll Free Number: 1-800-SBC-VOTE • Website Address: WWW.SBCVOTE.COM

Santa Barbara (805) 568-2200, Fax (805) 568-2209 • Santa Maria (805) 346-8374, Fax (805) 346-8342 • Lompoc (805) 737-7705
Santa Maria Branch Office: 511 E. Lakeside Parkway, Santa Maria • Lompoc Branch Office: 401 E. Cypress Ave, Room 102, Lompoc