

County of Santa Clara

Registrar of Voters

1555 Berger Drive, Bldg. 2
San Jose, CA 95112
Mailing Address: P.O. Box 611360, San Jose, CA 95161-360
(408) 299-VOTE (8683) (866) 430-VOTE (8683) FAX: (408) 998-7314
www.sccvote.org



Dear Voter,

The County of Santa Clara Registrar of Voters is sending this **Signature Verification Statement** letter because the signature on your provisional ballot envelope did not match our records. Your vote will not be processed unless you follow the steps outlined in this letter.

To correct this error, you must complete one of the options provided in the instructions on the back of this letter. The Registrar must receive the statement on the back of this letter, or you may visit the Registrar of Voters office to re-sign your original ballot envelope no later than **5:00 PM on Tuesday, October 12, 2021** to ensure your Provisional Ballot is processed for counting.

County of Santa Clara Registrar of Voters 1555 Berger Drive, Building 2 San Jose, CA 95112 Toll Free: 866-430-VOTE (8683) Fax: 408-998-7314 Email: voterinfo@rov.sccgov.org	Regular Business Hours: Monday – Friday 8:00 AM – 5:00 PM (Excluding Holidays)
For directions to our office, visit: www.sccgov.org/sites/rov/Resources/Pages/HoursLocationsDirections.aspx	

***Your Signature Verification Statement
must be received by the County of Santa Clara Registrar of Voters' Office
no later than 5:00 PM on October 12, 2021.***



**READ THESE INSTRUCTIONS CAREFULLY.
FAILURE TO FOLLOW THESE INSTRUCTIONS MAY CAUSE YOUR
BALLOT NOT TO BE COUNTED.**

In order for your Provisional Ballot to be processed, fill out the statement below and sign on the line above "Voter's Signature". You may return your signed statement using any of the following return options:

- 1. Email the signed and completed statement to our office.** The emailed statement must be received by our office no later than **5:00 PM on October 12, 2021.** The email address is voterinfo@rov.sccgov.org.
- 2. Mail the signed and completed statement to our office in the enclosed postage-paid envelope.** The statement must be received by our office at the address below no later than **5:00 PM on October 12, 2021.** Postmarks will not be accepted.
- 3. Fax the signed and completed statement to our office.** The faxed statement must be received no later than **5:00 PM on October 12, 2021.** The fax number is 408-998-7314.
- 4. In person at the Registrar of Voters' Office.** You may come to our office at the address below, Monday through Friday 8:00 AM to 5:00 PM to RE-SIGN your original Provisional Ballot envelope or return the Signature Verification Statement. This must be done no later than **5:00 PM on October 12, 2021.**

SIGNATURE VERIFICATION STATEMENT

I, _____, am a registered voter of Santa Clara County,
(Name of Voter)

State of California. I declare under penalty of perjury that I am the person whose name appears on the Provisional Ballot envelope. 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 provisional ballot will not be processed for counting.

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

(Witness) _____
If voter is unable to sign, voter may make a mark which shall be witnessed by one person.

Dated this _____ day of _____, 2021.

Residence Address: _____
Street Address City Zip Code

Mailing Address: _____
Street Address City Zip Code

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