



BALLOT OATH

Complete and return this form with your voted ballot. Both OATH and BALLOT must be received by 8:00pm (PST) on Election Day.

Fax your voted ballot and oath to (562) 232-7924 or (877) 614-1127 (Use country code if outside of the U.S.)

In choosing to return your ballot by fax or mail, you have waived your right to have your voted ballot kept secret (California Elections Code, Section 3106). Once received, your vote choices will be duplicated by an elections official onto ballot card(s). Warning: voting twice in the same election is a crime.

1. PRINT NAME: 2. DATE OF BIRTH:

First Name Middle Name or Initial Last Name

3. LA COUNTY RESIDENCE ADDRESS (please print)

Number and Street - (P.O. Box, Rural Route, etc. not acceptable) (Designate N, S, E, W if used) U.S.A.

City County Zip Code

4. MAILING ADDRESS (please print)

Number and Street - (P.O. Box, Rural Route, etc. not acceptable) (Designate N, S, E, W if used) U.S.A.

City County Zip Code

4. TELEPHONE NUMBER: () EMAIL:

OATH OF VOTER

Please read the following statement and then sign and date below.

I declare as follows:

- (1) I am absent from the California county where I am registered to vote; and
(2) am a 1) member of the active or reserve components of the United States Army, Navy, Air Force, Marine Corps, or Coast Guard; a Merchant Marine; a member of the United States Public Health Service Commissioned Corps; a member of the National Oceanic and Atmospheric Administration Commissioned Corps of the United States; or a member on activated status of the National Guard or state militia; or 2) an eligible spouse or dependent of such person; or 3) an eligible United States citizen living outside of the territorial limits of the United States or the District of Columbia; and
(3) I am a United States citizen, at least 18 years of age or older on Election Day, and I am eligible to vote in the California jurisdiction in which I am voting with the enclosed/attached voted ballot; and
(4) I am not currently serving a state or federal prison term for the conviction of a felony; and
(5) I have not been found mentally incompetent to vote by a court, or if so, my voting rights have been reinstated; and
(6) I am not registering, requesting a ballot, or voting in any other jurisdiction in the United States, except the California jurisdiction cited in this enclosed/attached ballot; and
(7) I am the person whose name appears on this document.
(8) I am a resident of Los Angeles County, State of California, or am qualified as an elector pursuant to paragraph (2) of subdivision (b) of Section 321 of the Elections Code and I have not voted, nor intend to vote, a ballot from any other jurisdiction for the same election.
(9) I understand that, as with any vote by mail voter, my signature, whether on this oath of voter form or my identification envelope, will be permanently separated from my voted ballot to maintain its secrecy at the outset of the tabulation process and thereafter.

I declare under penalty of perjury under the laws of the State of California or the United States that the foregoing is true and correct.

Your ballot will not be counted unless you sign this declaration and include it in the same fax transmission or mailed with your ballot. You must sign in your own handwriting.

X YOUR SIGNATURE AS REGISTERED TO VOTE (Power of Attorney NOT ACCEPTABLE) Date

OFFICIAL USE ONLY

Table with 4 columns: VOTER ID #, BALLOT GROUP #, AV ID #, SERIAL #