



## COUNTY CLERK, RECORDER AND ASSESSOR ELECTIONS DIVISION

**READ THESE INSTRUCTIONS CAREFULLY. FAILURE TO FOLLOW THESE INSTRUCTIONS  
MAY CAUSE YOUR VOTE BY MAIL BALLOT NOT TO COUNT.**

If it was determined that the signature you provided on your vote by mail ballot does not match the signature(s) on file in your voter record, the signature verification statement must be completed and returned as soon as possible.

**The signature verification statement must be received by the Santa Barbara County Elections office no later than 5 pm on Tuesday, December 4, 2018.**

Please complete and sign the Signature Verification Statement and return using one of the following options:

1. **By Email:** [votebymail2@co.santa-barbara.ca.us](mailto:votebymail2@co.santa-barbara.ca.us)

2. **By Fax:** (805) 681-4003

3. **By Mail:**

Santa Barbara County Elections  
Attn: Vote by Mail  
PO Box 61510  
Santa Barbara CA 93160-1510

\*Please make sure to provide sufficient postage and note the statement must be received by 5:00 pm on Tuesday, December 4, 2018. Postmarks will not be accepted.

4. **In Person:**

Office Locations

SANTA BARBARA	SANTA MARIA	LOMPOC
<b>4440 – A Calle Real</b> <b>Santa Barbara, CA 93110</b> Monday – Friday 8 am – 5 pm	<b>511 E. Lakeside Parkway, Ste. 134</b> <b>Santa Maria, CA 93455</b> Monday – Friday *8 am – 5 pm; *closed 12 pm – 1 pm	<b>401 E. Cypress Ave., Rm. 102</b> <b>Lompoc, CA 93436</b> Monday – Friday *9 am - 4 pm; *closed 12 pm – 1 pm

Polling Places

The statement may be returned to any Polling Place in Santa Barbara County on Election Day, Tuesday, November 6<sup>th</sup>.

If it is possible that someone else signed your envelope, or you have any questions please contact our office at (805) 568-2200 or 1-800-SBC-VOTE for further instructions.



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### SIGNATURE VERIFICATION STATEMENT

I, \_\_\_\_\_, am a registered voter of Santa Barbara County,  
PRINT YOUR FULL NAME

State of California. I declare under penalty of perjury that I requested and returned a vote by mail ballot. I am a resident of the precinct in which I have voted, and I am the person whose name appears on the vote by mail 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 vote by mail ballot will be invalidated.

**PLEASE COMPLETE ALL INFORMATION:**

**VOTER'S SIGNATURE:** \_\_\_\_\_   
 (Power of Attorney cannot be accepted)

**NOTE:** If voter is unable to sign, he or she may make a mark which shall be witnessed by one person

**WITNESS' SIGNATURE:** \_\_\_\_\_

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 2018.

Residence address: \_\_\_\_\_  
Street Address City Zip Code

Mailing address: \_\_\_\_\_  
Street Address City Zip Code

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

**Phone (805) 568-2200 ♦ Fax (805) 681-4003 ♦ email: [votebymail@co.santa-barbara.ca.us](mailto:votebymail@co.santa-barbara.ca.us)**

<b>Santa Barbara Office</b>	4440-A Calle Real	8:00 am-5:00 pm M-F
<b>Santa Maria Office</b>	511 E. Lakeside Pkwy, Ste. 134	8:00 am-12:00 pm & 1:00 pm-5:00 pm M-F
<b>Lompoc Office</b>	401 E. Cypress, Room 102	9:00 am-12:00 pm & 1:00 pm-4:00 pm M-F
<b>Extended Hours</b>	All locations	Saturday, October 20, 2018 9:00 am-1:00 pm Monday, October 22, 2018 8:00 am-6:00 pm Saturday, November 3, 2018 9:00 am-1:00 pm Tuesday, November 6, 2018 7:00 am-8:00 pm