



KERN COUNTY AUDITOR-CONTROLLER-COUNTY CLERK-ELECTIONS

1115 Truxtun Avenue, 1st and 2nd Floor • Bakersfield, CA 93301-4639

Dear Voter,

We received your Vote by Mail or Provisional Ballot. Unfortunately, you did not sign the voter declaration on the return envelope. Your ballot cannot be counted without your signature. To ensure that your Vote by Mail Ballot is counted, this Unsigned Ballot Statement must be completed and returned to our office by the date below. Read these instructions carefully. Failure to follow these instructions may cause your ballot not to count.

Once you complete this form, return it by any of the following:

- o Fax to (661) 868-3723
o E-mail to votebymail@kerncounty.com
o Mail using the postage-paid return envelope included, or a separate envelope addressed to: Kern County Elections, 1115 Truxtun Ave. Bakersfield, CA 93301
o Drop off at our office or any Official Kern County Drop Box
o Any Kern County polling place on Election Day

This statement must be received by our office no later than 5 p.m. June 21, 2022

Your signature on this form must match your signature in your voter record.

UNSIGNED BALLOT STATEMENT

I, _____, am a registered voter of Kern County, State of California. I declare under penalty of perjury that I returned a vote by mail or provisional 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 or 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 vote by mail or provisional ballot will be invalidated.

COMPLETE ALL INFORMATION:

Voter's Signature: _____ Date: _____

(Power of attorney not acceptable)

Witness Signature: _____

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

Residence Address: _____

Street and Number

City

Zip Code