

JUNE 3, 2008 PRIMARY ELECTION
APPLICATION FOR VOTE BY MAIL BALLOT

To request a Vote By Mail Ballot, complete the information on this form. This Application Form must be received by the Elections Official no later than **MAY 27, 2008**.

1. **PRINT NAME:** _____ 2. **DATE OF BIRTH:** _____

First Name Middle Name or Initial Last Name

3. **RESIDENCE ADDRESS** (please print):

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

City County Zip Code

4. **TELEPHONE NUMBER:** (____) _____ (____) _____
(Optional)

Daytime Evening

5. **MAILING ADDRESS FOR BALLOT, IF DIFFERENT FROM ABOVE. (PLEASE PRINT)**
NOTE: ORGANIZATIONS DISTRIBUTING THIS FORM MAY NOT PREPRINT MAILING ADDRESS INFORMATION.

Number and Street/P.O. Box (Designate N.S.E.W if used)

City U.S. State or Foreign Country Zip Code

6. Non-Partisan voters may choose to vote for candidates of one of the following parties: **Democratic or Republican** If you wish to request a partisan sample ballot, check the box below and affix your party preference. If you request a Vote By Mail Ballot and do not check the box you will receive Non-Partisan ballot materials, which will only allow you to vote for Non-Partisan contests.

NOTE: Although the American Independent Party has authorized crossover voting, there are no qualified American Independent Candidates on the ballot in Los Angeles County.

I am not presently affiliated with any political party. However, for this Primary election only, I request a Vote By Mail Ballot for the

(Affix Party Name) Party

7. THIS APPLICATION FORM WILL NOT BE ACCEPTED WITHOUT THE PROPER SIGNATURE OF THE APPLICANT

I have not applied for, nor do I intend to apply for, a Vote by Mail Ballot from any other jurisdiction for this election. I certify under penalty of perjury under the laws of the State of California that the name, residence address and information I have provided on this application are true and correct.

SIGNATURE

Date

WARNING: Perjury is punishable by imprisonment in state prison for two, three or four years. (Section 126 of the California Penal Code)

8. **THIS FORM IS PROVIDED BY:** _____

IMPORTANT: ORGANIZATIONS PROVIDING THIS FORM MUST ENTER THEIR NAME, ADDRESS AND TELEPHONE NUMBER

VBMAPP 3/2008

FOR OFFICIAL USE ONLY

NOTICE – You have the legal right to mail this form to:

Registrar-Recorder/County Clerk
Vote By Mail Section
P O Box 30450, Los Angeles, CA 90030-0450

or deliver to:

12400 Imperial Hwy. Norwalk, CA, 90650
3rd Floor Room 3002 8am – 5pm
(562) 466-1323

Any Voter wishing to become a Permanent Vote By Mail Voter may call our office at: (562) 466-1323 for further information.

Returning this application to anyone else may cause a delay that could interfere with your right or ability to vote.

The format used on this application **MUST** be used by ALL individuals, organizations, and groups that distribute Vote By Mail Ballot applications. Failure to conform to this format may result in criminal prosecution. Elec. Code Secs. 3007 & 18402

Under Federal law, election materials are available in other languages in Los Angeles County 1-800-581-VOTE.

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NOTE: Although the American Independent Party has authorized crossover voting, there are no qualified American Independent Candidates on the ballot in Los Angeles County.

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