

REGISTRAR OF VOTERS

1300 South Grand Avenue, Bldg. C Santa Ana, California 92705 (714) 567-7600 ocvote.gov **BOB PAGE**Registrar of Voters

Mailing Address: P.O. Box 11298 Santa Ana, California 92711

Application to Provide Vote-By-Mail Ballot to Representative February 25, 2025, State Senate District 36 Special Primary Election

If a voter needs a second Vote-by-Mail ballot, the voter may apply in writing for a Vote-by-Mail ballot to be provided to the voter's representative. This application must be provided in person to the county elections office by the voter's representative.

PRINT NAME:			DATE OF BIRTH:			
	First	Middle or Initial	Last	Month/Day/	Year	
RESIDENCE A	DDRESS:					
Number and Stre	et (P.O. Box w	ill not be accepted)				
City			Zip Code	California County		
TELEPHONE	NUMBER (OPTIONAL):				
VOTER'S STA	ATEMENT A	ND AUTHORIZATI	ION:			
I authorize	to obtain my ballot and deliver it to me. Authorized Representative					
CERTIFICATIO	ON:					
I certify under p true and correc		ury under the laws o	f the State of Califo	rnia that the information I have prov	ided on this application is	
SIGNATURE OF VOTER (Do Not Print):				Date:		
Warning: Perjur	y is a felony,	ounishable by impriso	onment in state prise	on for up to four years. (Penal Code	§ 126)	
If a voter is ur	able to sigr	, they may make a	a mark which shal	I be witnessed.		
WITNESS (IF APPLICABLE):			WITNESS SIGNATURE:			
	REPRESEN	ITATIVE'S STATEI	MENT (to be signe	ed in the presence of the election	s official):	
	zed Represent		edge receipt of	Name of Voter	's Vote-by-Mail ballot.	
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NAME OF RE	PRESENTA	TIVE'S SIGNATURI	=			
		ned to the Registr o.m. on Election D		ce, to any Vote Center or ballot	drop box in State	
Deliver to:		County Registrar o				



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